

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. North
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 07 1997 8:00am
Secretary of State

DOCUMENT # N 12929 (8)

1. Corporation Name
ROBERT'S PARK HOMEOWNERS
ASSOCIATION, INC.

Principal Place of Business Mailing Address
3390 GANDY BLVD. 3390 GANDY BLVD.
NO. 26 NO. 26
ST. PETERSBURG, FL. ST. PETERSBURG, FL.
33702 33702

2. Principal Place of Business 2a. Mailing Address
21 3390 GANDY BLVD. 26 3390 GANDY BLVD.
Suite, Apt. #, etc # 26 Suite, Apt. #, etc # 26
22 City & State 27 City & State
23 ST. PETERSBURG, FL. 28 ST. PETERSBURG, FL.
24 Zip 25 PINELLAS 29 Zip 30 PINELLAS

3. Date Incorporated or Qualified 3a. Date of Last Report
01/10/1986 02/11/1996
4. FEI Number Applied For
59-2874920 Not Applicable
5. Certificate of Status Desired ☒ \$8.75 Additional
Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be
Added to Fees
8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
COOPER, GORDON
3390 GANDY BLVD. # 25
ST. PETERSBURG, FL. 33702

10. Name and Address of New Registered Agent
81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE *[Signature]* 4 apr '97
Signature typed or printed name of registered agent and block applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS
TITLE ☐ DELETE
NAME COOPER, GORDON
STREET ADDRESS 3390 GANDY BLVD. #25
CITY-ST-ZIP ST. PETERSBURG, FL. 33702
TITLE ☐ DELETE
NAME MARSHALL, JOSEPH
STREET ADDRESS 3390 GANDY BLVD. #24
CITY-ST-ZIP ST. PETERSBURG, FL. 33702
TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
TITLE ☒ DELETE
NAME SLUSHER, ETHEL
STREET ADDRESS 3390 GANDY BLVD # 54
CITY-ST-ZIP ST. PETERSBURG, FL. 33702
TITLE ☐ DELETE
NAME LE CLEAR, NORMAN
STREET ADDRESS 3390 GANDY BLVD. # 26
CITY-ST-ZIP ST. PETERSBURG, FL. 33702
TITLE ☐ DELETE
NAME ASSIST. TREASURER
STREET ADDRESS JORDON, HOWARD.
CITY-ST-ZIP 3390 GANDY BLVD. #102
ST. PETERSBURG, FL. 33702

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE ☒ Change ☐ Addition
4.2 NAME SECRETARY
4.3 STREET ADDRESS SCHWOYER, GERE
4.4 CITY-ST-ZIP 3390 GANDY BLVD. # 175
ST. PETERSBURG, FL. 33702
5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
500002180185
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***70.00

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *[Signature]* TREASURER
NORMAN D. LE CLEAR
APRIL 4 1997
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E037 (9/96)