

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # **N15083** (1)  
1. Corporation Name  
**PARK PLACE OF DEEP CREEK CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business  
**C/O ROBERT C. SIFRIT  
3906 RANCH CREEK DR.  
AUSTIN TX 78730**

Mailing Address  
**C/O ROBERT C. SIFRIT  
3906 RANCH CREEK DR.  
AUSTIN TX 78730**

3. Date Incorporated or Qualified  
**05/23/1986**

3a. Date of Last Report  
**05/01/1995**

2. Principal Place of Business  
**21**

2a. Mailing Address  
**26**

4. FEI Number  
**58-1649119**

Applied For  
☐ Not Applicable

Suite, Apt. #, etc.  
**22**

Suite, Apt. #, etc.  
**27**

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

City & State  
**23**

City & State  
**28**

6. Election Campaign Financing  
Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

Zip  
**24**

Country  
**25**

Zip  
**29**

Country  
**30**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**SIFRIT, ROBERT C.,  
2315 AARON STREET  
PORT CHARLOTTE FL 33952**

**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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstalling)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
PD	HOLDEN, HELEN A.	3906 RANCH CREEK DR.	AUSTIN TX	<input type="checkbox"/>
S	LEONARD, F. RICHARD	144 W. MARION AVE.	PUNTA GORDA FL	<input type="checkbox"/>
T	FABER, RUSSELL C.	1625 W. MARION AVE.	PUNTA GORDA FL	<input type="checkbox"/>
D	BRUCE, MAY	4/2 SUCCOTH CT	EDINBURGH, SCOTLAND.	<input type="checkbox"/>
D	WHITESIDE, JOAN D.	WYMAN HILL	WOODSTOCK VT	<input type="checkbox"/>
				<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: Helen A. Holden, Pres  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4-16-96

Date

512-343-2132

Daytime Phone #

CR2E037 (12/95)