Q-5-98 B N92 a FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1998

DOCU	MENT # N164	65 (9)			
	ENTERS RUN HOMEOWNI	ERS' ASSOCIATION,	INC.		
Principal Plac	e of Business	Mailing Address		A HABILLAN ARI EINNE ARNIT ALDIE BITON ATTI DIRIT GEGIN DI	81) #1011 #1011 #1811 1001
LUTZ FL 33549 1301 SEMINO		C/O STERUNG MANA	GEMENT	3. Date Incorporated or Qualified	
		1301 SEMINOLE BLVD., SUITE 172 LARGO FL 34640		08/21/1986	
••		US		4, FEI Number	Applied For
6 Delevinos D	lace of Business	De Mailing Address		59-2717102	Not Applicable
2. Frincipar P	INCE OF DUSINESS	2a, Mailing Address		5. Certificate of Status Desired	8.75 Additional Fee Required
Suite, Apt. #, etc.		Suite, Apt. #, etc.		6. Election Campaign Financing	55.00 May Be
22		27			Added to Fees
City & State		City & State		7. Is this nonprofit corporation a homeowners association?	
23 Zip	Country	Zip	Country	8. This corporation owes or has paid the current	
24	25	29	30		es No
	9. Name and Address of Curr	ent Registered Agent		10. Name and Address of New Registered Age	nt
			81 Name		
STERLING MANAGEMENT			82 Street A	Address (P.O. Box Number is Not Acceptable)	
1301 SEMINOLE BLVD			83		
SUITE 172 LARGO FL 34640			83		
EAHGU	rl 34640		84 City	FL ⁸	5 Zip Code
11. Pursuant	to the provisions of Sections 617.0	502 and 617.1508. Florida S	latutes, the above-named	corporation submits this statement for the purpose of cha	anging its registered
office or r	egistered agent, or both, in the Sta im familiar with, and accept the obt	ite of Florida. Such change v	vas authorized by the corp	oration's board of directors. I hereby accept the appoint	ment as registered
SIGNATURE	an intermed with, and dooops the oo.	igations of, contains in record	,, , 10,104 014,0100.		
	Signature, typed or printed name of registered a		(NOTE: Registered Agent signature r		
12.	OFFICERS A	ND DIRECTORS DELETE	13.	ADDITIONS/CHANGES TO OFFICERS AND DIF	Change Addition
TITLE NAME	KOEBERNIK, NORMA	L) bitter	1.2 NAME	V.P. ANGEL ECHEVARNIA	onange Zagadunon
STREET ADDRESS	1725 SPINNING WHEEL DR	XIVE	1.3 STREET ADDRESS	1771 MEGUER PK	•
CITY-ST-ZIP	LUTZ FL	,	1.4 CITY-ST-ZIP	Lutz, 41. 33549	
TITLE	DVP	DELETE	2.1 TITLE	5	Change Addition
NAME	Greene, Bonnie	/\	2.2 NAME	JULIE KETTERER	-
STREET ADDRESS	1517 GUNSMITH		2.3 STREET ADDRESS	1741 TINKER DR.	
CITY-ST-ZIP	LUTZ FL	DELETE	2. 4 CITY-ST-ZIP	LUTZ, 71. 33549	Change Addition
TITLE	S LANGIEV ANN	Noticie.		MOLLY BERBERICH	Change
NAME STREET ADDRESS	Langley, ann 24734 silversmith	•	3.3 STREET ADDRESS		
CITY-ST-ZIP	LUTZ FL		3.4. CITY-ST-ZIP	1916 WOSDCUT Dr.	
TITLE	T	DELETE			Change Addition
NAME	SHELTON, ART		4. 2 NAME	JAMES BUARD	
STREET ADDRESS	1921 WOODCUT		4.3 STREET ADDRESS	1705 SPINNING WHEEL DE.	
CITY-ST-ZIP	LUTZ FL		4.4 CiTY - ST - ZIP	4utz, 71.	
TITLE	D	DELETE	5.1 TITLE	U	Change
NAME	NEMATH, MARY		5.2 NAME	PAT CUNNING HAM	i
STREET ADDRESS	1730 SPINNING WHEEL			1721 SPINNING WHEEL DR.	
CITY-ST-ZIP	LUTZ FL	₩ DELETE	5.4 CHTY-ST-ZIP	4ut2, 71.	Change Addition
TITLE	D CARLAND MENNY	X DELETE			
NAME	WELNIK, KEVIN	- 1	6.2 NAME 6.3 STREET ADDRESS	ROHALD COTTEPILL STE. 30	2

14. I 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 14 (changed, or on an attachment with an address.

FILED

Feb 05 1998 8:00am

Secretary of State