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Jan 22 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N16879 (1)

1. Corporation Name
LE MARIAS HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business 1801-D FAIRLANE ROAD TALLAHASSEE FL 32301 US	Mailing Address 1801-D FAIRLANE RD TALLAHASSEE FL 32303-4456 US
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2. Principal Place of Business 21 PO BOX 3352	2a. Mailing Address 26 PO BOX 3352
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State 23 Tallahassee, FL	City & State 28 Tallahassee, FL
Zip 24 32315	Country 25 Leon
Country 29 32315	Country 30 Leon

3. Date Incorporated or Qualified 09/18/1986	3a. Date of Last Report 02/09/1996
4. FEI Number 59-6201905	Applied For ☐ 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

**BASS, NANCY
3405 CHEROKEE RIDGE TRAIL
TALLAHASSEE FL 32301**

10. Name and Address of New Registered Agent

81 Name same
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	PD	☐ DELETE
NAME	BASS, NANCY	
STREET ADDRESS	1801-I W. THARPE ST.	
CITY-ST-ZIP	TALLAHASSEE FL 32303	
TITLE	TD	☐ DELETE
NAME	KELLEY, SUSAN	
STREET ADDRESS	1801-D FAIR LANE RD	
CITY-ST-ZIP	TALLAHASSEE FL 32303	
TITLE	SD	☒ DELETE
NAME	JANOWSKI, JENNIFER	
STREET ADDRESS	1812-F FAIRLANE RD.	
CITY-ST-ZIP	TALLAHASSEE FL 32303	
TITLE	D	☐ DELETE
NAME	ADAMS, JASON	
STREET ADDRESS	PO BOX 14894	
CITY-ST-ZIP	TALLAHASSEE FL	
TITLE	D	☒ DELETE
NAME	ANDERSON, BRENT	
STREET ADDRESS	7504 BEAVER FORD RD.	
CITY-ST-ZIP	TALLAHASSEE FL 32312	
TITLE	D	☒ DELETE
NAME	VILLAZON, DANIEL	
STREET ADDRESS	1848-A W. THARPE ST.	
CITY-ST-ZIP	TALLAHASSEE FL 32303	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	Nancy Bass	☒ Change ☐ Addition
1.2 NAME	3405 Cherokee Ridge Trl	
1.3 STREET ADDRESS	Tallahassee FL 32312	
1.4 CITY-ST-ZIP		
2.1 TITLE	TD	☒ Change ☐ Addition
2.2 NAME	Kelley, Susan	
2.3 STREET ADDRESS	3405 Cherokee Ridge Trl	
2.4 CITY-ST-ZIP	Tallahassee, FL 32305	
3.1 TITLE	Kelley Bush	☐ Change ☒ Addition
3.2 NAME	1812-L W. Tharpe St.	
3.3 STREET ADDRESS	Tallahassee, FL 32303	
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	Tamesia Brown	☐ Change ☒ Addition
5.2 NAME	1812-C W. Tharpe St.	
5.3 STREET ADDRESS	Tallahassee, FL 32303	
5.4 CITY-ST-ZIP		
6.1 TITLE	Tommy Kelley	☐ Change ☒ Addition
6.2 NAME	1848-C W. Tharpe St.	
6.3 STREET ADDRESS	Tallahassee, FL 32303	
6.4 CITY-ST-ZIP		

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: Nancy R Bass 1/9/97 904 893-1806

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (9/96)