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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N17591

1. Corporation Name

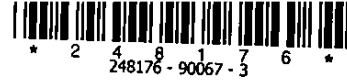
LIONSHEAD HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business

5747 39TH ST CIR E
BRADENTON FL 34203

Mailing Address

PO BOX 20172
BRADENTON FL 34203



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

10/30/1986

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number

65-0462392

Applied For

Not Applicable

City & State

City & State

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

Zip Country

Zip Country

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PALMER, MITCHELL
5747 39TH ST CIR E
BRADENTON FL 34203

81 Name MAUDE VINING

82 Street Address (P.O. Box Number is Not Acceptable)

83 5710 42ND ST. E.

84 City Bradenton

85 Zip Code FL 34203

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 MAUDE VINING Secretary MAUDE VINING 3/13/99

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

(NOTE: Registered Agent signature required when reinstalling)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D
NAME BENJAMIN, BRUCE E
STREET ADDRESS 5907 42ND ST E
CITY-ST-ZIP BRADENTON FL 34203

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

PAUL LABOLT
5703 E. 41ST ST.
BRADENTON FL 34203

TITLE D
NAME LINDSEY, JANET
STREET ADDRESS 5725 39TH ST, CIRCLE E
CITY-ST-ZIP BRADENTON FL

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

ED LEE
5709 42ND ST. E.
BRADENTON FL 34203

TITLE VD
NAME SEGLEM, KATHERINE M
STREET ADDRESS 5807 41ST ST. E.
CITY-ST-ZIP BRADENTON FL 34203

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

DON CICHOWSKI
4107 59TH DLACR E.
BRADENTON FL 34203

TITLE PD
NAME ARNUT, GARY B
STREET ADDRESS 5906 42ND ST E
CITY-ST-ZIP BRADENTON FL 34203

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

GARY ARNUT
5906 42ND ST E
BRADENTON FL 34203

TITLE D
NAME MARTINEZ, LUIS A
STREET ADDRESS 5713 39TH CIR E
CITY-ST-ZIP BRADENTON FL 34203

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

ANDRE SCHARROO
4206 59TH DL E
BRADENTON, FL 34203

TITLE TD
NAME HAUGEN, JOHN M
STREET ADDRESS 5717 39TH ST. CIRCLE, E.
CITY-ST-ZIP BRADENTON FL 34203

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 13 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: MAUDE VINING
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/13/99 941.751.1943
Date Daytime Phone #

CR2E037 (1/98)