

FILE NOW: FILING FEE IS \$61.25

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May 06 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # N18220 (6)**  
1. Corporation Name  
**MELWOOD OAKS HOMEOWNERS ASSOCIATION, INC.**



Principal Place of Business <b>325 40TH STREET CIR. W. PALMETTO FL 34221 US</b>	Mailing Address <b>325 40TH STREET CIR. W. PALMETTO FL 34221 US</b>
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3. Date Incorporated or Qualified <b>12/11/1986</b>
4. FEI Number <b>59-2837889</b>
Applied For <input type="checkbox"/> Not Applicable

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29	Country 25	Country 30
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5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>
7. Is this nonprofit corporation a homeowners association? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent  
**LETTY, RONALD J.  
438 40TH COURT WEST  
PALMETTO FL 34221**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DT LETTY, RONALD J. 438 40TH CT. W. PALMETTO FL</b>	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<b>President <del>RM</del> DP Letty, Ronald J 438 40th Ct West Palmetto, FL 34221</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DS BURLEIGH, PATTI 4123 3RD AVE., WEST PALMETTO FL</b>	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<b>Vice President <del>XX</del> DV Fran Williamson 310 40th St Circle West Palmetto, FL 34221</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DV MALLETT, DOROTHY 327 40TH COURT WEST PALMETTO FL</b>	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<b>Secretary DS Patti Lewis 448 40th Ct West Palmetto, FL 34221</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>DP BRETT, ALICE 324 40TH COURT WEST PALMETTO FL</b>	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<b>Treasurer DT Susan L Shively 438 40th Ct West Palmetto, FL 34221</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.

SIGNATURE: *Susan L Shively* **REQUIRED** 04-10-98 941-722 8476

CR2E037 (10/97)