4-17-97 13-4/858 C FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # N18426

(9)

FILED Apr 17 1997 8:00 am Secretary of State

1. Corporation	NORTE HOMEOWNERS ASS	OCIATION, INC.			
Principal Place	e of Business	Mailing Address			TI \$181 \$101 0101 0191 E101 0101 1001
725 BLACKSTONE BLDG. 725 BLACKSTONE BLDG. JACKSONVILLE FL 32202 JACKSONVILLE FL 32202-3448)		
				3. Date Incorporated or Qualified 12/23/1986	3a. Date of Last Report 07/02/1996
2AE	lace of Business	2a. Mailing Address	VISTA CT.	4. FEI Number 59-2749662	Applied For
Suite, Apt.	1 DUNA VISTA CT.	26 ZUSI DUNA Suite, Apt. #, etc.	VISTA CI.	39-2149002	Not Applicable \$8.75 Additional
22	w, 010.	27		5. Certificate of Status Desired	Fee Required
City & State	6	City & State	··········	6. Election Campaign Financing	\$5.00 May Be
	ANTIC BEACH, FL		EACH, FL	Trust Fund Contribution	Added to Fees
Zip 24 322	[20]	11	Country DUVAL		Yes X No
	9. Name and Address of Current	Registered Agent	81 Name	10. Name and Address of New Re	
JARD1			INE, EDWARD F., JR.		
REITER, DEE D. 725 BLACKSTONE BLDG.			82 Street Add 2051	ress (P.O. Box Number is Not Acceptate DUNA VISTA COURT) (9)
JACKSONVILLE FL 32202			83		
			84 City	NTIC BEACH	FL 85 Zin Code 32233
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corpora office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation					
office or r	egistered agent, or both, in the State of familiar with, and accept the obligation	of Florida. Such change was au	thorized by the corpora	ition's board of directors. I hereby accep	pt the appointment as registered
SIGNATURE	EDWARD F. JARI			AP	RIL 9, 1997
	Signature typed or printed name of registered agen	t and little if applicable. (NOTE:	Registered Agent signature requ	red when restating)	DATE
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12 Change Addition
TITLE NAME	VD Wheatley, Susan	L) better	1.1 TITLE 1.2 NAME		Company Common
STREET ADDRESS	2008 SELVA MADERA COURT		1.3 STREET ADDRESS		
CITY - ST - ZIP	ATLANTIC BEACH FL		1.4 CITY-ST-ZIP		
TITLE	Р	☐ DELETE	2 1 TITLE		☐ Change ☐ Addition
NAME	JARDINE, EDWARD F JR.		2.2 NAME	·	,
STREET ADDRESS	2051 DUNA VISTA CT.		23 STREET ADDRESS		
CITY-ST-ZIP	ATLANTIC BCH FL	DELETE	2.4 City-St-ZiP 3.1 Title		Change Addition
NAME	MCCARTHY, DONNA	_	3.2 NAME		
STREET ADDRESS	1064 SELVA MARINA DRIVE		3.3 STREET ADDRESS		
CITY-ST-7IP	ATLANTIC BEACH FL		3.4. CITY - ST - ZIP		
TITLE	T	☐ DELETE	4.1 TITLE		Change Addition
NAME	LELAND, JANINE		4. 2 NAME		
STREET ADDRESS	2039 SELVA MADERA COURT		4.3 STREET ADDRESS		
CITY-ST-ZIP	ATLANTIC BEACH FL	DELETE	4.4 CITY - ST - ZIP		Change Addition
TITLE	705405	[] DETEIR	5.1 TITLE		Change Addition
name Street address	TREACE, JULIA 1962 COLINA COURT		5.2 NAME 5.3 STREET ADDRESS		
	ATLANTIC BEACH FL		5.4 CITY-ST-ZIP		
CITY-ST-ZIP TITLE	SO SO	☐ DELETE	6.1 TITLE		Change Addition
NAME	LIBIAN, PAULA		6.2 NAME		v
STREET ADDRESS	1939 BRISTA DE MAR CR		6.3 STREET ADDRESS		
CITY-ST-ZIP	ATLANTIC BEACH FL		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:

E. F. JARDINE JR

4/9/97 (904) 241-2076