


FILE NOW: FILING FEE IS \$61.25

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Apr 28 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # N18683 (5) 1. Corporation Name THE COLONNADES RESIDENT'S CLUB, INC.					
Principal Place of Business COLONNADES REISIDENTS CLUB LAKELAND FL 33811 US			Mailing Address 4800 COLONNADES CLUB BLVD LAKELAND FL 33811-1578 US		
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 01/09/1987 3a. Date of Last Report 05/01/1996 4. FEI Number 59-2835910 5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
9. Name and Address of Current Registered Agent SANDELL, CARMELA 4883 LEISUREWOOD LANE LAKELAND FL 33811			10. Name and Address of New Registered Agent 81 Name 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 <i>Carmela V. Sandell</i> DATE <i>4/14/97</i> (NOTE: Registered Agent signature required when reinstating)					
12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE <input checked="" type="checkbox"/> DELETE NAME WOLFE, JOYCE STREET ADDRESS 4991 PLEASANT HOLLOW TRAIL CITY-ST-ZIP LAKELAND FL			1.1 TITLE <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 1.2 NAME Trustee 1.3 STREET ADDRESS Doris Anderson 1.4 CITY-ST-ZIP 1629 Memory Lane, Lakeland, FL		
TITLE <input checked="" type="checkbox"/> DELETE NAME BUSSE, DOROTHY STREET ADDRESS 1637 MEMORY LANE CITY-ST-ZIP LAKELAND FL			2.1 TITLE <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 2.2 NAME Vice-President 2.3 STREET ADDRESS Ellie Bolch 2.4 CITY-ST-ZIP 1468 Colonnades Circle S. Lakeland, FL		
TITLE <input type="checkbox"/> DELETE NAME SANDELL, CARMELA V. STREET ADDRESS 4883 LEISUREWOOD LANE CITY-ST-ZIP LAKELAND FL			3.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 3.2 NAME President 3.3 STREET ADDRESS Sandell, Carmela 3.4 CITY-ST-ZIP 4883 Leisurewood Lane Lakeland, FL		
TITLE <input checked="" type="checkbox"/> DELETE NAME BLAZOVICH, BARBARA STREET ADDRESS 4801 SQUIRE HOLLOW DRIVE CITY-ST-ZIP LAKELAND FL			4.1 TITLE <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition 4.2 NAME Treasurer 4.3 STREET ADDRESS Richard Powers 4.4 CITY-ST-ZIP 1631 Colonnades Circle N. Lakeland, FL		
TITLE <input checked="" type="checkbox"/> DELETE NAME MCCABE, BILL STREET ADDRESS 4926 GOLDENVIEW LANE CITY-ST-ZIP LAKELAND FL			5.1 TITLE <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 5.2 NAME Trustee 5.3 STREET ADDRESS Art Betancourt 5.4 CITY-ST-ZIP 4933 Colonnades Cir. E Lakeland, FL		
TITLE <input type="checkbox"/> DELETE NAME POWERS, RICHARD A. STREET ADDRESS 1631 COLONNADES CIRCLE NORTH CITY-ST-ZIP LAKELAND FL			6.1 TITLE <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 6.2 NAME TRUSTEE 6.3 STREET ADDRESS OLLO, BEA 6.4 CITY-ST-ZIP 1666 BIRCHWOOD LOOP LAKELAND, FL 33811		

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: *Carmela V. Sandell*

4/14/97

74-646-7018

CR2E037 (9/96)