FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

•	1996							

DOCUI	MENT # N1885	0	(0)								
BOB'S LANDING HOMEOWNERS ASSOCIATION, INC.											
Principal Place	of Business	Mailin	g Address						HEN EIGH EIGH		
20 N ORANG	GE AVE	20 1	N ORANGE AVE								
#700 ORLANDO FI	L 32801	#70 ORL	0 .ando fl 32901								
		-					3. Date Incorporated or Qua 01/21/1987	dified 3	a. Date of L 03/1	ast Report 5/1995	
2. Principal Pl	ace of Business	2a. Ma	ailing Address				4. FEI Number		30,1	Applied For	
21		26					59-2785320			Not Applicable	
Suite, Apt.	#, etc.	27 St	ite, Apt. #, etc.				5. Certificate of Status Desir	ed [.75 Additional ee Required	
City & State	9		ty & State				6. Election Campaign Finance			5.00 May Be	
23		28					Trust Fund Contribution			dded to Fees	
Zip	Country	Zip)	Country			8. This corporation has liabil			er s. 199.032,	
24	9. Name and Address of Curren	29 nt Registere	ed Agent	30			Florida Statutes 10. Name and Address of I		es 🔀 No ered Agent		
				81	Nam	e					
COLLIN	G, LEE JAY			82	Stree	t Aridnes	ss (P.O. Box Number is Not Ac	centable)			
	RANGE AVENUE, STE 700										
1 ORLANI	DO FL 32801			83							
÷				84	City				FL 85	Zip Code	
11. Pursuant t	to the provisions of Sections 617.0502	and 617.19	508. Florida Statut	es, the above-r	amed	corporat	ion submits this statement for t	he purpose	, ,	its registered office	
or register	red agent, or both, in the State of Florid th, and accept the obligations of, Secti	da Suchich	ando was authori:	ead by the care	oration	's board	of directors. I hereby accept the	e appointme	ent as registe	ered agent. I am	
SIGNATURE											
12.	Signature, typed or printed name of registered agent OFFICERS AN:			OTE: Registered Ager	t signatur	e required v	when reinstating) ADDITIONS/CHANGES T		ATE R AND DIREC	CTORS IN 12	
TITLE	PD	DUINCOTO	DELETE	1.1 TITLE	Di	776	sident	3 OFFICE TR	F Char		
NAME	COOK, MARVIN			1.2 NAME	•	Car	al A Martin		4		
STREET ADDRESS	BOB'S LANDING PK LOT 22			1.3 STREET	ADDRES	: Bo	bs Landing Ya	rk Lo	+ 36		
CITY-ST-ZIP	BABSON PARK FL			1.4 DITY - S	T- Z IP	ΓR_{a}	bson tark Flo	rida	<i>3382</i>	7	
TITLE	D		DELETE	2.1 TITLE	DI				🔀 Char	nge 🔲 Addition	
NAME	BERGSTROM, GERALD			2 2 NAME		18	ina Folkerth	rk L	0+6		
STREET ADDRESS	BOBS LANDING PARK LOT 4			2 3 STREET		12	bson Park, Flor	ماء نه		2 67	
CITY-ST-ZIP TITLE	BABSON PARK FL 33827-96 D	51	DELETE	2. 4 CITY - 3	71-ZIP 20 ≤	7.21	cretary,		3382 18 10har		
NAME	BUSH, TONY		M JOCECTE	3.2 NAME	د ت	30	cretary yllis Kohler pls Landing Pa ubson Park, l egsurer		PA CONC	igo [] vidoition	
STREET ADDRESS	BOB'S LANDING PK LOT 3			3.3 STREET	ADDRES	\mathbf{R}	als Landing Pa	irk 1	ot 49	7	
CITY-ST-ZIP	BABSON PARK FL			3.4. CITY - 5		Ba	ibson Park.	Florid	a 33	3827	
TITLE	SD	·	DELETE	4.1 TITLE		750	easurer		Char	nge 🔲 Addition	
NAME	BENOIT, DOROTHY			4. 2 NAME		Be	rt Kohler T				
STREET ADDRESS	BOB'S LANDING PARK, LOT	15		4.3 STREET			be landing	51. 51. /	1	, , , , , , , , , , , , , , , , , , ,	
CITY-ST-ZIP	BABSON PARK FL		Portere	4.4 CITY - S				loric	la 3:	3827	
TITLE	TD DEV		DELETE	5.1 TITLE	אע	lm-	rector irvin Cook	$\overline{}$	Char	nge 🔲 Addition	
NAME STREET ADDRESS	Ward, Rex Bobs Landing PK Lot 46			5.2 NAME 5.3 STREET	AUDDEC		obs Landing	Box	22		
CITY-ST-ZIP	BABSON PARK FL			5.4 CITY - S		$ \stackrel{\sim}{\mathcal{Q}} $	Lean Port	Fla	rida	33827	
TITLE	PUDOOLI LVIII LE		DELETE	6.1 THILE	1-217		, <u>2010 - 1900</u> 1901 - 1901 - 1900			nge Addition	
NAME				6.2 NAME			800001 -n2/25/46	ಪರ) ೨೦೧೭೧			
STREET ADDRESS				6.3 STREET	ADDRES	3	-03/25/96 ***61.25	.01021.	~ ~000 0	25	
CITY-ST-ZIP				6.4 CITY - S	T - Z IP		**** 01.∠0		-0	~	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

(941) 638-2552

CR2E037 (12/95)