## **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 #
1. Corporation Name

Principal Place of Business

N19393

(0)

Mailing Address

OAK PARK VILLAGE MOBILE HOME OWNERS RENTERS ASSO CIATION INC.

1 GRAPE P.O.BOX 656 ALVA FL 33920			P.O	1 GRAPE P.O.BOX 656 ALVA FL 33920-0656				3. Date Incorporated or Qualified  3a. Date of Last Report	
								01/30/1987 02/13/1996	
2. Principal Place of Business				2a. Mailing Address				4. FEI Number Applied For	
21			25	<del></del>				<b>59-2799777</b> Not Applicable	
Suite, Apt. #, etc.			27					5. Certificate of Status Desired See Required Fee Required	
City & State			ļ,	City & State				6. Election Campaign Financing \$5.00 May Be	
23			28					Trust Fund Contribution Added to Fees	
Zip	ļ	Country		Zip Count		try		8. This corporation has liability for intangible tax under s. 199.032,	
24 25			29					Florida Statutes Yes No	
	9, Name	and Address of C	urrent Regist	ered Agent		10. Name and Address of New Registered Agent  81 Name			
						51	Name		
COLLING, LEE J. 700 STE 20 N. ORANGE AVE.							Street A	t Address (P.O. Box Number is Not Acceptable)	
FIRST UNION BLD.									
ORLANDO FL 32801							City	FL 85 Zip Code	
11., Pursuant to	o the provisi	ons of Sections 61	7.0502 and 61	7.1508, Florida Statu	tes, the abo	OV8	-named	d 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.									
	iiidiiiida Wi	in, and accept the	obligations of	0001011 017.0000, 11	onda otata	100			
SIGNATURE:	Signature typed	or printed name of register	red agent and title i	I applicable (NO)	TE: Registered	Agei	ni signature	re required when reinstating) DATE	
12. OFFICERS AND DIRECTORS 1								ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
JULE	D			DELETE	1.1 111	.E		D Change X Addition	
NAME	ROWLE	E, MADDIE			1.2 NAA	ΛE		HELENE ZIMMICK	
STREET ADDRESS NA P.O. BOX #194 -11 ELDER					1.3 STR	13 STREET ADDRESS 4 GUTS ST. P.O.BOX 717			
CiTY-SI-7i₽	ALVA FI				1.4 CIT	Y-51	T-21P	ALVA. FL. 33920	
TITLE	DT			DELETE	2.1 TITL	.E		D/T Ok Change Addition	
NAME MESSINA, DOROTH A.					22 NAME			MESSINA, DOROTHY A.	
STREET ADDRESS		2.3 STREET ADDRESS		ADDRESS	l se come on nonlino				
CITY-ST-ZIP	ALVA FI	E ST BOX 452			2.4 CIT	Υ-5	ST-ZIP	ALVA. FIA.33920	
TITLE					3.1 TITL	_		D/P Addition	
NAME	IAME WYNN. BESSIE M.				3.2 NAA	ME		WYNN, BESSIE M.	
STREET ADDRESS	P.O.BO	( 656, 1 GRAPE			3.3 STA	REET	ADDRESS	1 GRAPE ST P.O BOY 656	
CITY-ST-ZIP	ALVA FI	•			3.4. CIT	Y-5	ST-ZIP	1 GRAPE ST. P. Q. BOX 656 ALVA 33920	
TITLE	DS			DELETE	4.1 TITE	£		D/S Change Addition	
NAME	BAXTER	, LORRAINE			4. 2 NA	ME		BAXTER, LORRATNE	
STREET ADDRESS		E ST BOX 0721			4.3 \$TR	REET	adoress		
CITY-ST-ZIP	ALVA FI				4.4 CIT	Y-5	T-ZIP	ALVA, FLA. 33920	
TITLE	DVP			DELETE	5.1 TITL	LE		D/VP X Change Addition	
NAME		R, DOROTHY		•	5.2 NAM	ME	,	WESTERBOKETHY DOROTHY	
STREET ADDRESS	P 0 B0				5.3 STR	REET	ADDRESS	о тите ст \ P.O.BOX 817	
CITY - ST - ZIP	ALVA FI				5.4 CIT			9 JUTE ST. ) P.O.BOX 817 ALVA, FLASCOCKEXX33920	
TOLE	* **********			☐ DELETE	B.1 TITE		· -	Change Addition	
NAME					6.2 NA	ME			
STREET ADDRESS					1		ADDRESS	.'	
CITY - SI - ZIP					6.4 CIT				

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. 11647/6181/6

SIGNATURE:

**FILED** 

Mar 26 1997 8:00am

Secretary of State