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Apr 29 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N19502 (6)
1. Corporation Name
THE POND ROAD PROPERTY OWNERS ASSOCIATION, INC.

Principal Place of Business
128 POND RD
P.O. BOX 1809
DAVENPORT FL 33837
US

Mailing Address
PO BOX 1809
DAVENPORT FL 33837
US

2. Principal Place of Business
21 128 Pond Rd
Suite, Apt. #, etc.
22
City & State
23 Davenport, Fla.
Zip
24 33837
Country
25 Polk
26 P.O. Box 1809
Suite, Apt. #, etc.
27
City & State
28 Davenport, Fla.
Zip
29 33837
Country
30 Polk

3. Date Incorporated or Qualified
03/03/1987

4. FEI Number
NOT APPLICABLE

Applied For
Not Applicable

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? ☒ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No

9. Name and Address of Current Registered Agent
GRIMES, LILA
120 POND RD
DAVENPORT FL 33837

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
FL

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

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	D	DELETE
NAME	CECILY BENINCASA	
STREET ADDRESS	135 POND ROAD	
CITY-ST-ZIP	DAVENPORT FL	
TITLE	D	DELETE
NAME	BENINCASA, MICKEY	
STREET ADDRESS	135 POND RD	
CITY-ST-ZIP	DAVENPORT FL	
TITLE	ST TREASURER	DELETE
NAME	GRIMES, LILA	
STREET ADDRESS	120 POND ROAD	
CITY-ST-ZIP	DAVENPORT FL	
TITLE	D	DELETE
NAME	ROGERSON, CLARE	
STREET ADDRESS	144 POND ROAD	
CITY-ST-ZIP	DAVENPORT FL	
TITLE	P	DELETE
NAME	GILES, EVERETT	
STREET ADDRESS	108 POND RD	
CITY-ST-ZIP	DAVENPORT FL	
TITLE	D	DELETE
NAME	RIGNOLA, TONY	
STREET ADDRESS	127 POND RD	
CITY-ST-ZIP	DAVENPORT FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	President	Change	Addition
1.2 NAME	Robin Truys		
1.3 STREET ADDRESS	131 Pond Road		
1.4 CITY-ST-ZIP	Davenport, Fla. 33837		
2.1 TITLE	Vice President	Change	Addition
2.2 NAME	Lewis White		
2.3 STREET ADDRESS	147 Pond Road		
2.4 CITY-ST-ZIP	Davenport, Fla. 33837		
3.1 TITLE	Secretary	Change	Addition
3.2 NAME	Nancy Giles		
3.3 STREET ADDRESS	108 Pond Rd.		
3.4 CITY-ST-ZIP	Davenport, Fla.		
4.1 TITLE	Director	Change	Addition
4.2 NAME	Rachel Paulita		
4.3 STREET ADDRESS	149 Pond Road		
4.4 CITY-ST-ZIP	Davenport, Fla. 33837		
5.1 TITLE		Change	Addition
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE		Change	Addition
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			

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:

Robin Truys

4/13/98

(941)

421-1444

CR2E037 (10/97)