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Mar 26 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 # N20096 (6)
 1. Corporation Name
RACQUET CLUB VILLAS AT HEATHROW CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business 2180 W SR 434 STE 5000 SENTRY MANAGEMENT, INC. LONGWOOD FL 32779	Mailing Address 2180 W SR 434 STE 5000 SENTRY MANAGEMENT, INC. LONGWOOD FL 32779
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2. Principal Place of Business 21 Suite, Apt. #, etc. City & State Zip Country	2a. Mailing Address 21 Suite, Apt. #, etc. City & State Zip Country
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3. Date Incorporated or Qualified 04/13/1987	4. FEI Number 59-2912844	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 HART, JAMES W, JR 2180 W SR 434 STE 5000 LONGWOOD FL 32779	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
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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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P CAHALL, PETER ☒ DELETE	1.1 TITLE	SD HALEY, SUSANNE ☐ Change ☒ Addition
NAME	CAHALL, PETER	1.2 NAME	HALEY, SUSANNE
STREET ADDRESS	300 INTERNATIONAL PARKWAY	1.3 STREET ADDRESS	211 WIMBLEDON CIR
CITY-ST-ZIP	HEATHROW FL	1.4 CITY-ST-ZIP	HEATHROW FL 32746
TITLE	SD DE L'ETOILE, ODETTE ☐ DELETE	2.1 TITLE	TD TABB, CARA ☐ Change ☒ Addition
NAME	DE L'ETOILE, ODETTE	2.2 NAME	TABB, CARA
STREET ADDRESS	239 WIMBLEDON CIR	2.3 STREET ADDRESS	231 WIMBLEDON CIR
CITY-ST-ZIP	HEATHROW FL	2.4 CITY-ST-ZIP	HEATHROW FL 32746
TITLE	TD THOMAS, CHARLES ☐ DELETE	3.1 TITLE	VD ☒ Change ☐ Addition
NAME	THOMAS, CHARLES	3.2 NAME	
STREET ADDRESS	104 WIMBLEDON CIR	3.3 STREET ADDRESS	
CITY-ST-ZIP	HEATHROW FL	3.4 CITY-ST-ZIP	
TITLE	D GARNER, JR C C ☐ DELETE	4.1 TITLE	PD GARNER JR, C.C. ☒ Change ☐ Addition
NAME	GARNER, JR C C	4.2 NAME	GARNER JR, C.C.
STREET ADDRESS	240 WIMBLEDON CIR	4.3 STREET ADDRESS	
CITY-ST-ZIP	HEATHROW FL	4.4 CITY-ST-ZIP	
TITLE	D RUBIN, ABRAHAM ☐ DELETE	5.1 TITLE	D STRANG, LORNA ☐ Change ☒ Addition
NAME	RUBIN, ABRAHAM	5.2 NAME	STRANG, LORNA
STREET ADDRESS	252 WIMBLEDON CIR	5.3 STREET ADDRESS	248 WIMBLEDON CIR
CITY-ST-ZIP	HEATHROW FL	5.4 CITY-ST-ZIP	HEATHROW FL 32746
TITLE	☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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: *Clifton Garner* **CLIFTON GARNER** 3/2/98

CR2E037 (10/97)