## FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

**FILED** Apr 14 1998 8:00am Secretary of State

DOCU 1. Corporatio	MENT # <b>N2071</b>	7 (7)				
LOT 13, BLOCK 278, UNIT 13 HOMEOWNERS' ASSOCIATION, INC.						
Principal Place of Business Mailing Address					n understan den tiden dann fandet nitte sant delt	i dilbit asakt As <del>a</del> kt bildt arbit tool
5605 GRANADA SEBRING FL 3		5605 Granada BLVD. Sebring FL 33872			3. Date incorporated or Qualified 05/19/1987	
					4. FEI Number 59-2881396	Applied For Not Applicable
2. Principal F	Place of Business	2a. Mailing Address			5. Certificate of Status Desired	\$8.75 Additional Fee Required
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
City & State City & State 28					7. Is this nonprofit corporation a homeow	
Zip 24	Country	Zip 29	Countr	у	This corporation owes or has paid the Personal Property Tax due June 30.	
57	9. Name and Address of Curren		1901		10. Name and Address of New Registers	
			81	Name		
ROBERTS, GEORGE J. 5605 GRANADA BLVD. SEBRING FL 33872			82		Iress (P.O. Box Number is Not Acceptable)	
			83	3		
			84	City		85 Zip Code
11. Pursuant office or r	to the provisions of Sections 617.050 registered agent, or both, in the State im familiar with, and accept the oblig	02 and 617.1508, Florida Statu e of Florida. Such change was lations of, Section 617.0503, Fl	tes, the above authorized b	ve-named cor by the corpora	poration submits this statement for the purposition's board of directors. I hereby accept the a	e of changing its registered appointment as registered
SIGNATURE .	Signature, typed or printed name of registered ag-				vired when reinstating) DATI	
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS A	<del></del>
TITLE	PD DELETE		1.1 TITLE	T		Change Addition
NAME	MCCARTY, MICHAEL		1.2 NAME	[	•	
STREET ADDRESS	5607 GRANADA BLVD.		1,3 STREE	T ADDRESS		
CITY-ST-ZIP	SEBRING FL		1.4 CITY-	ST-ZIP		
TITLE	<u></u>		2.1 TITLE			☐ Change ☐ Addition
NAME	MITCHELL, THOMAS J.		22 NAME	1		
STREET ADDRESS	*		1	T ADDRESS	•	
CITY-ST-ZIP			2. 4 CITY	-ST-ZIP		Character   1 & 2 mars
TITLE	std Roberts, George J.		3.1 TITLE 3.2 NAME			Change Addition
NAME CIDEET ADDRESS	5605 GRANADA BLVD.			1		
STREET ADDRESS CITY-ST-ZIP	SEBRING FL		3.3 STREE 3.4. CITY-	T ADDRESS		
TITLE		☐ DELETE	4.1 TITLE	31-211	<del></del>	Change Addition
NAME			4. 2 NAME	. [		• <u>_</u> •
STREET ADDRESS			1	T ADDRESS		
CITY-ST-ZIP			4.4 CITY-			
TITLE		DELETE	5.1 TITLE			Change Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREE	T ADDRESS		
CITY-ST-ZIP			5.4 CITY-	ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE			☐ Change ☐ Addition
HAME			6.2 NAME	ľ		
STREET ADDRESS			6.3 STREE	TADORESS		1

64 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: