


FILE NOW: FILING FEE IS \$61.25

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Jun 20 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Morham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N20954 (6)

1. Corporation Name

PROPERTY OWNERS ASSOCIATION OF UNIVERSITY WOODS, INC.

Principal Place of Business

Mailing Address

P.O. BOX 5613
WINTER PARK FL 32783-5613

P.O. BOX 5613
WINTER PARK FL 32783-5613



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 06/03/1987		3a. Date of Last Report 03/05/1996	
21		26		4. FEI Number 59-2887538		Applied For Not Applicable	
22 Suite, Apt. #, etc.		27 Suite, Apt. #, etc.		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
23 City & State		28 City & State		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24 Zip		29 Zip		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			
25 Country		30 Country					

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PURSER, PATRICK
3351 PAISLEY CIRCLE
ORLANDO FL 32817

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 **PATRICK A.J. Purser**

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

(NOTE: Registered Agent's signature required when reinstating)

DATE

4-28-97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PURSER, PATRICK	1.2 NAME	
STREET ADDRESS	3351 PAISLEY CIRCLE	1.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32817	1.4 CITY-ST-ZIP	
TITLE	VPD <input checked="" type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JACKSON, PAUL	2.2 NAME	
STREET ADDRESS	3162 RIDER PLACE	2.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32817	2.4 CITY-ST-ZIP	
TITLE	SD <input checked="" type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	RIVERS, EVELYN	3.2 NAME	
STREET ADDRESS	3155 RIDER PLACE	3.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32817	3.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	AMUNDSON, RICK	4.2 NAME	
STREET ADDRESS	3161 RIDER PLACE	4.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32817	4.4 CITY-ST-ZIP	
TITLE	DTS <input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WINDISH, RAYMOND	5.2 NAME	
STREET ADDRESS	3430 RIDER PLACE	5.3 STREET ADDRESS	
CITY-ST-ZIP	ORLANDO FL 32817	5.4 CITY-ST-ZIP	
TITLE	Rivera, Sarah <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	3304 Rider Place	6.2 NAME	
STREET ADDRESS	Orlando, FL 32817	6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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.

SIGNATURE

PATRICK A.J. Purser

PATRICK A.J. Purser

PATRICK A.J. Purser

4/1/97

CR2E037 (9/96)