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FILED

Feb 27 1997 8:00am  
Secretary of State

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N23680 (4)

1. Corporation Name

LOT 83, BLOCK 275, UNIT 13 HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business

4101 SUNN LAKES BOULEVARD  
SEBRING FL 33872-2131

Mailing Address

6434 MATANZAS DRIVE  
SEBRINGS FL 33872-2394  
US



3. Date Incorporated or Qualified  
12/01/1987

3a. Date of Last Report  
03/01/1996

2. Principal Place of Business

21 Suite, Apt. #, etc

22 City & State

23 Zip Country

24

2a. Mailing Address

26 Suite, Apt. #, etc

27 City & State

28 Zip Country

29

4. FEI Number

59-2900169

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

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RAMSEY, CHARLOTTE S  
6434 MATANZAS DR  
SEBRING FL 33872

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

*Rosemary Bowlus*

(NOTE: Registered Agent signature required when reinstating)

2/22/97

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD  
NAME BOWLUS, HAROLD  
STREET ADDRESS 6432 MATANZAS DR  
CITY-ST-ZIP SEBRING FL ☐ DELETE

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE VD  
NAME RAMSEY, CHARLOTTE  
STREET ADDRESS 6434 MATANZAS DR  
CITY-ST-ZIP SEBRING FL ☐ DELETE

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE STD  
NAME BARRY, GERALD  
STREET ADDRESS 6436 MATANZAS DR  
CITY-ST-ZIP SEBRING FL ☒ DELETE

3.1 TITLE STD  
3.2 NAME BOWLUS, ROSEMARY  
3.3 STREET ADDRESS 6432 MATANZAS DR.  
3.4 CITY-ST-ZIP SEBRING, FL. 33872 ☒ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP ☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP ☐ DELETE

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP ☐ Change ☐ Addition

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:

*Rosemary Bowlus* ROSEMARY BOWLUS

Date

2/22/97

1 (941) 382-3849  
1 (941) 382-3849

CR2E037 (9/96)