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Jun 09 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # N23728 (1)  
1. Corporation Name  
GOVERNOR'S PLACE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business Mailing Address  
2525 BAYSHORE BLVD UNIT B TAMPA FL 33629  
2525 BAYSHORE BLVD UNIT B TAMPA FL 33629-7318

3. Date Incorporated or Qualified 12/02/1987  
3a. Date of Last Report 07/17/1996

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip Country 28 Zip Country  
24 25 29 30

4. FEI Number 59-2871477 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  
WHITE, ROBERT  
2525 BAYSHORE BLVD  
UNIT B  
TAMPA FL 33629

10. Name and Address of New Registered Agent  
1 Name ANCHOR PROPERTY MANAGEMENT INC.  
2 Street Address (P.O. Box Number is Not Acceptable) 5519 HANLEY RD. SUITE B  
3  
4 City TAMPA FL 85 Zip Code 33634

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 *Robert A. White* 6/3/97 6/3/97  
Signature, typed or printed name of registered agent and, if applicable, (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

TITLE	P	<input type="checkbox"/> DELETE
NAME	NEWTON, R. PARK	
STREET ADDRESS	2525 BAYSHORE BLVD. #C	
CITY-ST-ZIP	TAMPA FL 33629	
TITLE	S	<input type="checkbox"/> DELETE
NAME	MCKEE, CLARENCE	
STREET ADDRESS	2525 BAYSHORE BLVD. #A	
CITY-ST-ZIP	TAMPA FL 33629	
TITLE	D	<input type="checkbox"/> DELETE
NAME	RAINS, ROGER	
STREET ADDRESS	2525 BAYSHORE BLVD. #E	
CITY-ST-ZIP	TAMPA FL 33629	
TITLE	T	<input type="checkbox"/> DELETE
NAME	WHITE, ROBERT A.	
STREET ADDRESS	2525 BAYSHORE BLVD. #B	
CITY-ST-ZIP	TAMPA FL 33629	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	LEWIS, THOMAS	
STREET ADDRESS	2525 BAYSHORE BLVD. #D	
CITY-ST-ZIP	TAMPA FL 33629	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	D DR. JEFFERY TEDDER
5.3 STREET ADDRESS	2525 BAYSHORE BLVD #D
5.4 CITY-ST-ZIP	TAMPA, FL 33629
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
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 *Sandra B. Morthgm* 6/3/97

CR2E037 (9/96)