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Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT **1998**

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

DOCUMENT # N26505 (0)

1. Corporation Name
FLETCHER'S POINT HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business	Mailing Address
~~%UNIVERSITY PROPERTIES, INC.~~ ~~824 E FLETCHER AVE~~ ~~TAMPA FL 33612-2610~~	~~%UNIVERSITY PROPERTIES, INC.~~ ~~824 E FLETCHER AVE~~ ~~TAMPA FL 33612-2610~~

3. Date Incorporated or Qualified: 05/19/1988

4. FEI Number: 59-2913297 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 7001 Temple Terrace Hwy	26 7001 Temple Terrace Hwy
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: Temple Terrace, Florida	28 City & State: Temple Terrace, Florida
24 Zip: 33637 25 Country: USA	29 Zip: 33637 30 Country: USA

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

LERNER, PATRICIA L
606 MADISON ST
STE 2001
TAMPA 33602

10. Name and Address of New Registered Agent

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DS GRAVES, SHIRLEE 2238 FLRTCHERS POINT CIRCLE TAMPA FL	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	DP GRAVES, Shirlee 2238 Fletchers Point Circle Tampa, FL. 33613	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ~~MCLAURIN, CHARLOTTE E~~ ~~2221 FLETCHERS POINT CIRCLE~~ ~~TAMPA FL~~	☑ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	DS Pratt, Juan F. 2236 Fletchers Point Circle Tampa, FL. 33613	☑ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DT ~~HU~~ ~~2201 FLETCHERS POINT CIR~~ ~~TAMPA FL~~	☑ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	D Kelly, Lynn S. 2207 Fletchers Point Circle Tampa, FL. 33613	☑ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~DVP~~ ~~WOODBERRY~~ ~~2200 FLETCHERS POINT CIRCLE~~ ~~TAMPA FL~~	☑ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	DS Samonsky, William 2212 Fletchers Point Circle Tampa, FL. 33613	☐ Change ☑ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D NICOL, JIM 2146 FLETCHER'S PT CIR TAMPA FL	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	DT Nicol, James 2146 Fletchers Point Circle Tampa, FL. 33613	☐ 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

CR2E037 (10/97)

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: Shirlee Graves 1/27/98 (813)264-9657