## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # N26505**

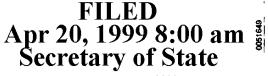
1. Corporation Name

FLETCHER'S POINT HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business							
7001 TEMPLE TERRACE HWY							
TEMPLE TERRACE FL 33637							
US							

Mailing Address

7001 TEMPLE TERRACE HWY TEMPLE TERRACE FL 33637



04-20-1999 90030 019 \*\*\*\*70.00

}							
2. Principal Place	2. Principal Place of Business 2a. Mailing Address 26 7628 N 56			STREET	3. Date incorporated or Qualifed 05/19/1988		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			50 00 10007		olied For
22		27 Suite 8					Applicable
City & State		City & State  28 TAMPA	FL		5. Certificate of Status Desired	\$8.75 A Fee Re	
Zip	Country	Zip	Coi	untry	6. Election Campaign Financing	\$5.00	May Be
24	25	29 33617	30	us	Trust Fund Contribution	Added to	Fees
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
				81 Name	ILLIAM C SPIVEY		
LERNER, PATRICIA L				82 Street Address (P.O. Box Number is Not Acceptable) 7628 N. S67H STREET			
606 MADISON ST				7628	NISGTH STREET		
STE 2001					T.		
TAMPA 33602 //				84 City TAMPA FL 85 Zip Code 336/7			
				7,	ampa FL		
11. Pursuant to the provisions of Sections 647-0502 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 families with an accept the obligations of, Section 617.0503, Florida Statutes.							
SIGNATURE Signature, typed chapated name of registered agent and title if applicable. (NOTE: Registered Agent signat					7//3/17	<u>,                                     </u>	
Signature, typed Propertied name of registered agent and title if applicable. (NOTE: Registered Agent at 12. OFFICERS AND DIRECTORS 13.					ADDITIONS/CHANGES TO OFFICERS AND	DIRECTO	RS IN 12_
TITLE D	OFFICERS AND	DIRECTORS DELETE		π.ε   <b>? 1</b>	)	☐ Change	Addition
NAME P		<del>_</del>	124	IAME B.A	KNEV DELANA.		
	38 FLRTCHERS POINT CIRCLE	•		TREET ADDRESS 2	ARNEY DELANA. 136 FLETCHERS POINT CIA	4	
F F	MPA FL 33613		B		AMPA, FL 33613		_
TITLE DS		DELETE			D	Change	Addition
1 1	YAT, JUAN F		2.2 N	IAME #	AZLEIT, LARRI		
				TREET ADDRESS 2	AZLETT, LARRI 231 FLETCHER'S POINT CIR		
	MPA FL 33613	/	2.46		MMPA, FL 33613		
TITLE D	-	DELETE				Change	Addition
1	ELLY, LYNN S		3.2 N	IAME 3	OHNSON, LINDA		
				TREET ADDRESS 2	253 FLETCHER'S POINT CIR		

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, with all other like empowered.

3.4. CITY-ST-ZIP

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DOELETE

DELETE

□ DELETE

TAMPA.

FL

TAMPA, FL 33613

d'ANGELO, MARILYN

MCCLUSKEY, DIANA 2235 FLETCHER'S POINT CIR

2346 FLETCHER'S POINT CIR

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

TILE

NAME STREET ADDRESS **TAMPA FL 33613** 

**TAMPA FL 33613** 

**TAMPA FL 33613** 

NICOL, JIM

SAMONSKY, WILLIAM

2212 FLETCHER'S POINT CIR

2146 FLETCHER'S PT CIR

Addition

Addition

Addition

☐ Change

☐ Change

☐ Change