SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.
AMOUNT DUE ON OR BEFORE 09/30/98: $61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: $236.25).

NONPROFIT CORPORATION ANNUAL REPORT
1998

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

FILED
Aug 19 1998 8:00am
Secretary of State

DOCUMENT # N28928 (2)

1. Corporation Name
L'IMAGE HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
C/O PRIME SITE REALTY 402 HIGH PT. DR. COCOA FL 32926 US	C/O PRIME SITE REALTY 402 HIGH PT. DR. COCOA FL 32926 US

3. Date Incorporated or Qualified: 10/19/1988
4. FEI Number: 59-2663040 ☐ 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
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

2. Principal Place of Business	2a. Mailing Address
21 3547 S. WASHINGTON AVE	26 P.O. BOX 106
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 TITUSVILLE, FL	28 TITUSVILLE, FL
24 Zip 32780-5613 25 Country US	29 Zip 32781-0106 30 Country US

9. Name and Address of Current Registered Agent

MATRONI, ALAN R
C/O PRIME SITE REALTY
402 HIGH PT. DR.
COCOA FL 32926

10. Name and Address of New Registered Agent

81 Name: DONALD MOORMAN
82 Street Address (P.O. Box Number is Not Acceptable): 3547 S. WASHINGTON AVENUE
83
84 City: TITUSVILLE FL 85 Zip Code: 32780

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: Donald Moorman DONALD MOORMAN, PRESIDENT 8-15-98
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PATCH, GLENN E. 3541 S.WASHINGTON AVE. TITUSVILLE FL 32780-5613	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D PUTTNAM, BARBARA 3553 S. WASHINGTON AVE. TITUSVILLE FL 32780-5613	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	DP MATRONI, ALAN R 3543 S WASHINGTON AVE. TITUSVILLE FL 32780-5613	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	D MATRONI, ALAN R. 3543 S. WASHINGTON AVENUE TITUSVILLE, FL 32780-5613	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ABBOTT, PATRICIA 3549 S. WASHINGON AVE. TITUSVILLE FL 32780-5613	☐ 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	D GORDON,THOMAS 3551 S.WASHINGTON AVE. TITUSVILLE FL 32780-5613	☐ 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	DP MOORMAN, DONALD 3547 S. WASHINGTON AVENUE TITUSVILLE, FL 32780-5613	☐ Change ☒ Addition

CR2E037 (5/98)

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: Donald Moorman DONALD MOORMAN PRESIDENT AUG. 15, 1998 407-269-1100
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #