

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1998



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

APPROVED  
AND  
FILED

98 APR 30 AM 9:08

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

DOCUMENT # N29935 (6)

1. Corporation Name

147 INTERLACHEN PLACE CONDOMINIUM ASSOCIATION, I  
NC.



Principal Place of Business

Mailing Address

2200 LUCIEN WAY  
STE 450  
MAITLAND FL 32751  
US

P O BOX 4961  
ORLANDO FL 32802-4961  
US

3. Date Incorporated or Qualified

12/29/1988

4. FEI Number

58-3014365

Applied For  
Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 1551 Sandspur Rd.

26 Suite, Apt. #, etc.

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 City & State

28 City & State

23 Maitland, FL

28 Maitland, FL

24 Zip Country

29 Zip Country

24 32751

29 32751

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

10. Name and Address of New Registered Agent

B&C CORPORATE SERVICES OF CENTRAL FL., INC  
390 NORTH ORANGE AVENUE  
SUITE 1100  
ORLANDO FL 32801

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

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 PD  
NAME GINSBURG, ALAN H  
STREET ADDRESS 2200 LUCIEN WAY, 450  
CITY-ST-ZIP MAITLAND FL

DELETE

1.1 TITLE D  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

PD  
Alan H. Ginsburg  
1551 Sandspur Rd.  
Maitland, FL 32751

Change Addition

TITLE VD  
NAME MUSANTE, ROBERT  
STREET ADDRESS 147 INTERLACHEN, #450  
CITY-ST-ZIP WINTER PARK FL

DELETE

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

300002516419  
-05/07/98--01122--003  
\*\*\*\*\*61.25 \*\*\*\*\*61.25

TITLE STD  
NAME GINSBURG, HARRIET F  
STREET ADDRESS 2200 LUCIEN WAY, 450  
CITY-ST-ZIP MAITLAND FL

DELETE

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

STD  
Harriet Ginsburg  
1551 Sandspur Rd.  
Maitland, FL 32751

Change Addition

TITLE TD  
NAME COLLINS, DONALD  
STREET ADDRESS 147 INTERLACHEN, #101  
CITY-ST-ZIP WINTER PARK FL

DELETE

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

Change Addition

TITLE D  
NAME PRESIDENT/D  
MARIANN MAHAN  
STREET ADDRESS 147 South Interlachen Ave #450  
CITY-ST-ZIP WINTER PARK FLORIDA 32789

DELETE

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

Director  
Alan H. Ginsburg  
1551 Sandspur Road  
Maitland, FL 32751

Change Addition

TITLE D  
NAME VICE TREASURER/D  
BILL BOYD  
STREET ADDRESS 147 South Interlachen Ave #450  
CITY-ST-ZIP WINTER PARK FLORIDA 32789

DELETE

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

Change Addition  
A. Alan  
4/30/98

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: MARIANN MAHAN

4-27-98

CP2E037 (10/97)