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Mar 17 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # N30953 (6)

1. Corporation Name

TAMPA PALMS UNIT 4B OWNER'S ASSOCIATION, INC.

DBA Sanctuary Homeowners Assoc.

Principal Place of Business

Mailing Address

TAMPA PALMS OWNERS ASSOC.
16101 COMPTON DRIVE
TAMPA FL 33647
US

16101 COMPTON DR
TAMPA FL 33647
US



3. Date Incorporated or Qualified

03/01/1989

4. FEI Number

59-2939180

Applied For

Not Applicable

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

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

MEZER, STEVEN H
1212 COURT ST.
SUITE B
CLEARWATER FL 34616

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 ☐ DELETE
NAME EDWARD, WILLIAM
STREET ADDRESS 15841 SANCTUARY DRIVE
CITY-ST-ZIP TAMPA FL 33647

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME WHITE, ROBERT
STREET ADDRESS 15876 SANCTUARY DRIVE
CITY-ST-ZIP TAMPA FL 33647

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

TITLE ☒ DELETE
NAME HATCHER, BARABARA
STREET ADDRESS 11313 GRANDVILLE DR
CITY-ST-ZIP TAMPA FL

3.1 TITLE Secretary (D)
3.2 NAME William Crump
3.3 STREET ADDRESS 16817 Sanctuary Dr, Tampa 33647
3.4 CITY-ST-ZIP

TITLE ☒ DELETE
NAME CONDEY, WILLIAM
STREET ADDRESS 6007 FAIRWAY PALMS COURT
CITY-ST-ZIP TAMPA FL

4.1 TITLE MRC (D)
4.2 NAME John Henne
4.3 STREET ADDRESS 15807 Serenity Cir. Tampa 33647
4.4 CITY-ST-ZIP

TITLE ☒ DELETE
NAME CRUMP WILLIAM
STREET ADDRESS 15817 SANCTUARY DR
CITY-ST-ZIP TAMPA FL

5.1 TITLE
5.2 NAME 400002463024
5.3 STREET ADDRESS -03/20/98--01020--001
5.4 CITY-ST-ZIP ***61.25

TITLE ☐ DELETE
NAME HENRIETTA, MARTIN
STREET ADDRESS 15840 SANCTUARY DRIVE
CITY-ST-ZIP TAMPA FL 33647

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

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

CR2E037 (10/97)