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**NONPROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

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May 01 1998 8:00am

Secretary of State

	TER LAKE PI	SACID CHARACE		COMMENCE,	1140.							
Principal Place of Business			Mailing Address				ገ ""	1811	19100 HII <b>979</b> 1	ı Vivil vibil ill	II MIDII OCOII IOOI	
10 EAST INTERLAKE BOULEVARD LAKE PLACID FL 33852			10 EAST INTERLAKE BOULEVARD LAKE PLACID FL 33852					ncorporated or Quali	fied		Applied Enr	
									9-1026434			Applied For Not Applicable
2. Principal F	Place of Business		2e. 26	Mailing Address				7	cate of Status Desire	d 🗆		5 Additional Required
Suite, Apt. #, etc.			Suite, Apt. #, etc.					6. Electio	n Campaign Financi	ng	\$5.0	O May Be
22 City & Sta	10		27	Cit. B Dista				<del></del>	und Contribution			d to Fees
23	ie.		28	City & State				7. Is this	nonprofit corporation	a homeowi	ners associa No	ition?
Zip		Country	201	Zip	Cou	ntrv		• This or	ornaration awas as be			Interallela
24	25	•	29		30	,			orporation owes or ha nat Property Tax due		Current year	Intangible ☐ No
	9. Name and	Address of Curren		tered Agent					and Address of Ne			
	1306		-		-	81	Name			<del></del>		
LOWMA	W, JOEP					82	Street Addr	occ (P.O. Boy	Number is Not Acce	antable)	<del></del>	
10 E. W	VITERLAKE BLVI	<b>D</b> .				•	Oli Bel Addit	665 (F.O. DOA	CINGINDER IS NOT ACC	вршине)		
LAKE P	LACID FL 3385	2				83						
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11. Pursuant	to the provisions	of Sections 617.060	2 and 6	17.1508, Florida Sta	tutes, the at	oove-	named corp	oration submi	its this statement for	the purpose	or changin	n ire indistalen
office or agent. I a	to the provisions regi <del>stere</del> d agent, an familiar with, a	of Sections 617.050 or both, in the State ad accept the obliga	2 and 6 of Floric ations of	17.1508, Florida Sta la. Such change wi , Section 617.0503,	atutes, the ab as authorized Florida State	oove- d by t utes.	named corporati	oration submi ion's board of	its this statement for directors. I hereby a	the purpose accept the a	ppointment	as registered
office or agent. I s	Lack	`/~~~	ک ۔	DEC 10	Lima		EXEC	<b>ジレノフ</b> C	DINGROW			
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indicated on this annual report or supplied with the information in decident in section 119.07(3)[1], Florida Statutes. I further certify that the information indicated on this annual report is reported and accurate and that my signature shall have the same legal effect as if made under eath; 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.

(Q41)