

FILE NOW: FILING FEE IS \$61.25

FILED

May 05 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N33067** (2)
1. Corporation Name
CONWAY LANDINGS HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business POST OFFICE BOX 590083 ORLANDO FL 32859-7083	Mailing Address POST OFFICE BOX 590083 ORLANDO FL 32859-7083
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3. Date Incorporated or Qualified

06/29/1989

4. FEI Number

59-2964758

Applied For
Not Applicable

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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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

**NORTH, ROGER D
5118 CODDINGTON ST
ORLANDO FL 32812**

81 Name	85 Zip Code
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL

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	D	☒ DELETE
NAME	YOUNG, LINDA L	
STREET ADDRESS	4559 CONWAY LANDINGS DR.	
CITY-ST-ZIP	ORLANDO FL	
TITLE	DP	☐ DELETE
NAME	BADANO, NORBERTO	
STREET ADDRESS	4581 CONWAY LANDINGS DR.	
CITY-ST-ZIP	ORLANDO FL	
TITLE	D	☐ DELETE
NAME	REINKE, JEANNE	
STREET ADDRESS	5189 CODDINGTON ST	
CITY-ST-ZIP	ORLANDO FL	
TITLE	DV	☐ DELETE
NAME	HUFF, TIMOTHY	
STREET ADDRESS	4515 CLARKSDALE CT	
CITY-ST-ZIP	ORLANDO FL	
TITLE	DST	☐ DELETE
NAME	NORTH, ROGER D	
STREET ADDRESS	5118 CODDINGTON ST	
CITY-ST-ZIP	ORLANDO FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	D	☐ Change ☒ Addition
1.2 NAME	Connatser Scott	
1.3 STREET ADDRESS	4588 Conway Landings Drive	
1.4 CITY-ST-ZIP	Orlando, FL. 32812-8132	
2.1 TITLE		☐ Change ☐ Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE		☐ Change ☐ Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		☐ Change ☐ Addition
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: **Roger D North** **Roger D. North** **4/25/98 (407) 584-5198**

CR2E037 (10/97)