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May 19 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # N35773 (3)

1. Corporation Name

LAKE MYRTLE SHORES HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business

% GEORGE M. LINDSEY III
520 S FLORIDA AVE
LAKELAND FL 33801

Mailing Address

% GEORGE M. LINDSEY III
520 S FLORIDA AVE
LAKELAND FL 33801-5229



3. Date Incorporated or Qualified
12/21/1989

3a. Date of Last Report
05/01/1996

4. FEI Number
59-2948262

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LINDSEY, GEORGE M., III
520 S FLORIDA AVE
LAKELAND FL 33801

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 DP
NAME LINDSEY, GEORGE M., III
STREET ADDRESS 1631 LAGOON PL
CITY - ST - ZIP LAKELAND FL

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

TITLE DS
NAME GUERTIN, LISA C
STREET ADDRESS 1208 GOLDFINCH DRIVE, #5
CITY - ST - ZIP PLANT CITY FL

2.1 TITLE TD
2.2 NAME
2.3 STREET ADDRESS 3216 Bloomingdale Villas Ct
2.4 CITY - ST - ZIP Brandon, FL

TITLE DT
NAME SKIPPER, E.M.
STREET ADDRESS 721 GLENDALE STREET
CITY - ST - ZIP LAKELAND FL

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

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

14. I do 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR George M. Lindsey III 4/1/97 94-682-6723

CR2E037 (9/96)