App ied For

Not Applicable \$8.75 Aciditional

FILE NOW: FILING FEE IS \$61.25

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

NONPROFIT CCRPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N38065

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

GUS BERT FARMS SUBDIVISION HOMEOWNERS ASSOCIATIO N. INC.

Principal Place of Business	Mailing Address
% DEAN COXEN	% DEAN COXEN
RT. 3 BOX 430C	RT. 3 BOX 430C
HAVANA FL 32333	HAVANA FL 32333

FILED Apr 26, 1999 8:00 am § Secretary of State

04-26-1999 90174 039 ****61.25



3. Date Incorporated or Qualifed

NOT APPLICABLE

5. Certificate of Status Desired

05/09/1990

4. FEI Nu nber



Zip Country Zip Country Zip Country S. Election Campaign Financing S. 50.00 kgy de Addet to Fees Pagent Addet to Fees Pagent Addet to Fees Pagent Addet to Fees Pagent Pa	23	_		28					5. Certificate of Status Desired	ſ	Fee Rec	quired		
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent	Zip	25	Coun:ry	T	Zip		intry		- 11	ı				
SHELFER, JAMES O. 1300 THOMASWOOD DR. TALLAHASSEE FL 32312 11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statules, the above-handed corporation submits this statement for the purpose of changing fir signifered agent, or both, in the State of Florida. Such change was authorized by the corporation submits this statement for the purpose of changing fir signifered agent, and familiar with, and accept the obligations of, Section 617,0503, Florida Statules, the above-handed corporation submits this statement for the purpose of changing fir signifered agent, and familiar with, and accept the obligations of, Section 617,0503, Florida Statules, the above-handed corporation submits this statement for the purpose of changing fir signifered agent, and familiar with, and accept the obligations of, Section 617,0503, Florida Statules, the above-handed corporation submits this statement for the purpose of changing fir signifered agent, and the provisions of Section 617,0503, Florida Statules, the above-handed corporation submits this statement for the purpose of changing fir signifered agent, or both, in the State of Florida, Such change was submitted by the corporation submits this statement for the purpose of changing fir signifered agent, and the provisions of Section 617,0503, Florida Statules, the above-handed corporation submits this statement for the purpose of changing fir signifered agent, or both, in the State of Florida, Such change statules, the above-handed corporation submits this statement for the purpose of changing fir signifered agent, or both, in the State of Florida, Such change statules, the above-handed corporation submits this statement for the purpose of changing fir signifered agent, or both, in the State of Florida, Such change agent, or both, in the State of Florida, Such change agent, or both, in the State of Florida, Such change agent, or both, in the State of Florida, Such change agent, or both, in the State of Florida, Such change agent, or both, in the State of Flo	24		Address of Current	نبب	stered Agent	1001			10. Name and Address of New Regi	stered A	gent			
1300 THOMASWOOD DR. TALLAHASSEE FI. 32312 Ba City FL 85 Zip Code 11. Pursuant to the provisions of Sections 617 0502 and 617 1508, Florida Statuties, the above-named corporation submits this statement for the purpose of changing its r significant and accept the obligations of Sections 617 0503, Florida Statuties, the above-named corporation submits this statement for the purpose of changing its r significant and accept the obligations of Sections 617 0503, Florida Statuties, the above-named corporation submits this statement for the purpose of changing its r significant agent and accept the obligations of Sections 617 0503, Florida Statuties, the above-named corporation submits this statement for the purpose of changing its r significant agent and accept the obligations of Sections 617 0503, Florida Statuties, the above-named corporation submits this statement for the purpose of changing its r significant agent and accept the obligations of Sections 617 0503, Florida Statuties, the above-named corporation submits this statement for the purpose of changing its r significant agent and accept the obligations of Sections 617 0508, Florida Statuties, the above-named corporation submits this statement for the purpose of changing its r significant agent and accept the obligations of Sections 617 0508, Florida Statuties, the above-named corporation submits this statement for the purpose of changing its registered agent and accept the obligations of Sections 617 0508, Florida Statuties, the above-named corporation submits this statement for the purpose of changing its registered agent and accept the obligations of Sections 17 0508, Florida Statuties, the above-named corporation should be presented to submit the purpose of changing its registered agent and accept the obligations of Sections 17 0508, Florida Statuties, the above-named corporation should be presented and sections and accept the obligations of Sections 12 1 1711. 1		Hame and	7.00				81	Name						
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TALLAHASSEE FL 32312 Ba							Stragt Address (F.O. Dox Marrider is Not Acceptable)							
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T. Pursuant to the provisions of Sections 617 0502 and 617 1506. Florida Statues, the above-named corporation submits this statement for the purpose of changing its rajistered office or registered agent, or both, in the State of Florida. Such change was insthorted by the cooper tion's board of circotors. I hereby accept the appointment as registered office or registered institution of the control of circotors. I hereby accept the appointment as registered office or registered of the obligations of Section 617 0503. Florida Statues. SIGNATURE SIGNATURE TO COPER, person or prosect raise of registered agent and title if registered agent speakure registered of the obligations of Section 617 0503. Florida Statues. TITLE D OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS. IND DIRECTORS IN 12 TITLE D Change Addition TITLE S DELETE 12 TITLE 12 TITLE 12 TITLE 13 TITLE 14 TITLE 14 TITLE 15 TIT	IALLATIA	SOLE 1 L 323 12	•				-	0.1			les Zin C	ode		
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	CITY-ST-ZIP	HAVANA FL	32333	. Hair	filing does not quelify for				d in Section 119 07(3)(i) Florida Statutes 1 fur	ther certif	v that the in	formation		

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 ar 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, with all other like empowered.

SIGNATURE:

CR2E037 (11/98)