

FILE NOW: FILING FEE IS \$61.25

FILED  
Apr 09 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # N38531 (2)**  
1. Corporation Name  
**LEMON BAY ISLES PHASE 4 PROPERTY OWNERS' ASSOCIATION, INC.**



Principal Place of Business <b>C/O HARRY LOGHRY 6095 TOUCAN DRIVE ENGLEWOOD FL 34224</b>	Mailing Address <b>C/O HARRY LOGHRY 6095 TOUCAN DRIVE ENGLEWOOD FL 34224-8796</b>
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3. Date Incorporated or Qualified <b>06/11/1990</b>	3a. Date of Last Report <b>03/28/1996</b>
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21. Principal Place of Business Suite, Apt. #, etc. City & State Zip Country	2a. Mailing Address Suite, Apt. #, etc. City & State Zip Country
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4. FEI Number <b>NOT APPLICABLE</b>	Applied For <input type="checkbox"/> Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent  
**LOGHRY, HARRY  
6095 TOUCAN DRIVE  
ENGLEWOOD FL 34224**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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 *Harry L. Loghry* (NOTE: Registered agent signature required when reinstating) DATE **3-25-97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>PD</b>	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>LOGHRY, HARRY</b>	1.2 NAME	
STREET ADDRESS	<b>6095 TOUCAN DRIVE</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>ENGLEWOOD FL 34224</b>	1.4 CITY-ST-ZIP	
TITLE	<b>VD</b>	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>RUPP, ROBERT</b>	2.2 NAME	
STREET ADDRESS	<b>8347 KINGLET DRIVE</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>ENGLEWOOD FL 34224</b>	2.4 CITY-ST-ZIP	
TITLE	<b>SD</b>	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>WRIGHT, ANDREW</b>	3.2 NAME	
STREET ADDRESS	<b>8486 KINGLET DRIVE</b>	3.3 STREET ADDRESS	
CITY-ST-ZIP	<b>ENGLEWOOD FL 34224</b>	3.4 CITY-ST-ZIP	
TITLE	<b>TD</b>	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>ALLEN, CHRISTINE</b>	4.2 NAME	
STREET ADDRESS	<b>8384 KINGLET DRIVE</b>	4.3 STREET ADDRESS	
CITY-ST-ZIP	<b>ENGLEWOOD FL 34224</b>	4.4 CITY-ST-ZIP	
TITLE	<b>VD</b>	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>DAY, MADELYN</b>	5.2 NAME	
STREET ADDRESS	<b>8394 KINGLET DRIVE</b>	5.3 STREET ADDRESS	
CITY-ST-ZIP	<b>ENGLEWOOD FL 34224</b>	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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.

CP2E037 (9/96)