

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

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95 MAY -1 AM 8:48

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995		FLORIDA DEPARTMENT OF STATE Sandra B. Matham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT #	N39302	(7)
1. Corporation Name ROUND LAKE ASSOCIATION, INC.		

Principal Place of Business 17316 LINDA VISTA CIRCLE LUTZ FL 33549	Mailing Address 17316 LINDA VISTA CIRCLE LUTZ FL 33549
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DO NOT WRITE IN THIS SPACE

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

3. Date Incorporated or Qualified 07/24/1990	3a. Date of Last Report 05/01/1994
4. FEI Number 59-3011589	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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No	

9. Name and Address of Current Registered Agent HOOPER, LEE 17316 LINDA VISTA CIRCLE LUTZ FL 33549	
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10. Name and Address of New Registered Agent Mr. James McManus 17326 Linda Vista Cir. Lutz, FL 33549	
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11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE JAMES W. McMANUS James W. McManus 4-28-95
Signature, typed or printed name of registered agent and title if applicable. Registered Agent signature required when reinstating. DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	11 TITLE	☐ Change ☐ Addition
NAME	STEINMETZ, RICHARD A	12 NAME	
STREET ADDRESS	3701 BERGER RD	13 STREET ADDRESS	
CITY, ST, ZIP	LUTZ FL	14 CITY, ST, ZIP	
TITLE	S	21 TITLE	☐ Change ☐ Addition
NAME	ELCHORN VON WYRMB, EDDIE	22 NAME	
STREET ADDRESS	17325 LINDA VISTA CIRCLE	23 STREET ADDRESS	
CITY, ST, ZIP	LUTZ FL	24 CITY, ST, ZIP	
TITLE	D	31 TITLE	☐ Change ☐ Addition
NAME	HOOPER, LEE	32 NAME	
STREET ADDRESS	17316 LINDA VISTA CIR.	33 STREET ADDRESS	
CITY, ST, ZIP	LUTZ FL	34 CITY, ST, ZIP	
TITLE	T	41 TITLE	☐ Change ☐ Addition
NAME	McMANUS, JAMES W.	42 NAME	
STREET ADDRESS	17326 LINDA VISTA CIR.	43 STREET ADDRESS	
CITY, ST, ZIP	LUTZ FL	44 CITY, ST, ZIP	
TITLE	D	51 TITLE	☒ Change ☐ Addition
NAME	DAME, ELWOOD S	52 NAME	DEPAULA, CARMEN
STREET ADDRESS	17328 LINDA VISTA CIRCLE	53 STREET ADDRESS	3820 LITTLE ROAD
CITY, ST, ZIP	LUTZ FL	54 CITY, ST, ZIP	LUTZ, FL 33549
TITLE	VP	61 TITLE	☐ Change ☐ Addition
NAME	PRINCE, E.F.	62 NAME	
STREET ADDRESS	3703 BERGER RD	63 STREET ADDRESS	
CITY, ST, ZIP	LUTZ FL	64 CITY, ST, ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: James W. McManus 4-28-95 813 761 1742
Signature and typed or printed name of signing officer or director. Date. Telephone #