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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Feb 26, 1999 8:00 am
Secretary of State

02-26-1999 90021 029 ****61.25

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DOCUMENT # N39409

1. Corporation Name

**THUNDERBIRD HILL SOUTH HOMEOWNERS ASSOCIATION, I
NC.**

Principal Place of Business

833 SUNBIRD TERRACE
SEBRING FL 33872

Mailing Address

833 SUNBIRD TERRACE
SEBRING FL 33872



2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MULLIS, BOYCE
500 THUNDERBIRD HILL RD
SEBRING FL 33872

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 **D** ☒ DELETE

NAME **FASANARO, AGNES**
STREET ADDRESS **800 SUNBIRD TERRACE**
CITY-ST-ZIP **SEBRING FL**

TITLE **V** ☐ DELETE

NAME **ADAMS, NORMA**
STREET ADDRESS **100 SUNBIRD SQ**
CITY-ST-ZIP **SEBRING FL**

TITLE **D** ☐ DELETE

NAME **STROIS, JOYCE**
STREET ADDRESS **308 SUNBIRD SQ**
CITY-ST-ZIP **SEBRING FL**

TITLE **P** ☒ DELETE

NAME **ALTHERR, HAROLD**
STREET ADDRESS **415 SUNBIRD SQUARE**
CITY-ST-ZIP **SEBRING FL**

TITLE **D** ☐ DELETE

NAME **MULLIS, SONJA**
STREET ADDRESS **500 THUNDERBIRD HILL RD**
CITY-ST-ZIP **SEBRING FL**

TITLE **S** ☒ DELETE

NAME **ALTHERR, MARJORIE**
STREET ADDRESS **415 SUNBIRD SQUARE**
CITY-ST-ZIP **SEBRING FL**

1.1 TITLE ☐

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

Howard Stoehr

701 Sunbird Terrace

Sebring, FL. 33872

2.1 TITLE ☒

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

Norma Adams

100 Sunbird Square

Sebring, FL. 33872

3.1 TITLE ☐

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

Lamar Ritenour

609 Sunbird Square

Sebring, FL. 33872

5.1 TITLE ☐

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

Dennis Sirois

308 Sunbird Square

Sebring, FL. 33872

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, with either like empowered.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/29/1999

A/C 941382-0607

Date

Daytime Phone #

CR2E037 (1/98)