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NONPROFIT
 CORPORATION
 ANNUAL REPORT
1999



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

DOCUMENT # N92000000949

1. Corporation Name

HOMEOWNERS' ASSOCIATION OF ARIANA VILLAGE, INC.

Principal Place of Business

1625 ARIANA ST
 NO. 217
 LAKELAND FL 33803
 US

Mailing Address

1625 ARIANA ST
 NO 217
 LAKELAND FL 33803
 US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24 25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29 30

3. Date Incorporated or Qualified

01/01/1993

4. FEI Number

59-3161436

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

9. Name and Address of Current Registered Agent

JACKSON, STANLEY
 1625 ARIANA ST
 LOT 48
 LAKELAND FL 33803

10. Name and Address of New Registered Agent

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

TITLE DP DELETE
 NAME COSTELLO, OLAF K
 STREET ADDRESS 1625 ARIANA ST 107
 CITY-ST-ZIP LAKELAND FL

TITLE DV DELETE
 NAME MORAN, PAT
 STREET ADDRESS 1625 ARIANA ST 151
 CITY-ST-ZIP LAKELAND FL

TITLE DV DELETE
 NAME DUNBAR, EDWARD
 STREET ADDRESS 1625 ARIANA ST #55
 CITY-ST-ZIP LAKELAND FL 33803

TITLE DT DELETE
 NAME KOEPPEN, EILEEN
 STREET ADDRESS 1625 ARIANA ST #137
 CITY-ST-ZIP LAKELAND FL

TITLE DVC DELETE
 NAME AFILANI, DOLORES
 STREET ADDRESS 1625 ARIANA ST 170
 CITY-ST-ZIP LAKELAND FL

TITLE DV DELETE
 NAME REVETTE, VICTOR
 STREET ADDRESS 1625 ARIANA ST 110
 CITY-ST-ZIP LAKELAND FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE SECRETARY DS Change Addition
 1.2 NAME JACKSON, STANLEY
 1.3 STREET ADDRESS 1625 ARIANA ST. LOT 48
 1.4 CITY-ST-ZIP LAKELAND, FL 33803

2.1 TITLE Change Addition
 2.2 NAME
 2.3 STREET ADDRESS
 2.4 CITY-ST-ZIP

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

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

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

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

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 all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Eileen Koeppe
EILEEN KOEPPEN
 TREASURER

Date

2/15/99

Daytime Phone #

1-941-688-6941

CR2E037 (11/98)