

FILE NOW: FILING FEE IS \$61.25

FILED  
May 11 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N92000000980 (4)**

1. Corporation Name

**CITIZENS OF SOUTHEAST MARION, INC.**



Principal Place of Business		Mailing Address		3. Date Incorporated or Qualified	
21961 SE 149TH LN UMATILLA FL 32784		21961 SE 149TH LN UMATILLA FL 32784		01/04/1993	
2. Principal Place of Business		2a. Mailing Address		4. FEI Number	
21 29934 SE 170th Street		26 P.O. Box 562		59-3202786	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		Applied For	
22		27		Not Applicable	
City & State		City & State		5. Certificate of Status Desired	
23 Altoona, Florida		28 Altoona, Florida		<input type="checkbox"/> \$8.75 Additional Fee Required	
Zip		Zip		6. Election Campaign Financing	
24 32702		29 32702		Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
Country		Country		7. Is this nonprofit corporation a homeowners association?	
25 U.S.A.		30 U.S.A.		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent			
SNOWBERGER, DANIEL 21961 SE 149TH LN UMATILLA FL 32784		81 Name Sue J. Roudabush			
		82 Street Address (P.O. Box Number is Not Acceptable) 29934 SE 170th Street			
		83			
		84 City Altoona, FL 85 Zip Code 32702			
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 <i>Sue J. Roudabush</i> Sue J. Roudabush April 20, 1998	
(NOTE: Registered Agent signature required when reinstating)	

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	C	1.1 TITLE	C
NAME	SNOWBERGER, DANIEL	1.2 NAME	Roudabush, Sue J.
STREET ADDRESS	21961 SE 149 LANE	1.3 STREET ADDRESS	29934 SE 170th Street
CITY-ST-ZIP	UMATILLA FL	1.4 CITY-ST-ZIP	Altoona, Florida 32702
TITLE	SD	2.1 TITLE	SD
NAME	ROUNDABUSH, SUE	2.2 NAME	Thornton, William O.
STREET ADDRESS	P.O. BOX 562 N/A	2.3 STREET ADDRESS	20821 SE 141 Lane
CITY-ST-ZIP	ALTOONA FL	2.4 CITY-ST-ZIP	Umatilla, Florida 32784
TITLE	TD	3.1 TITLE	TD
NAME	THORNTON, WILLIAM O.	3.2 NAME	Norfolk, Sandra J.
STREET ADDRESS	20821 SE 141 LANE	3.3 STREET ADDRESS	20865 SE 142nd Lane
CITY-ST-ZIP	UMATILLA FL	3.4 CITY-ST-ZIP	Umatilla, Florida 32784
TITLE	D	4.1 TITLE	
NAME	COOKE, DEE	4.2 NAME	
STREET ADDRESS	24415 W HIGHWAY 450	4.3 STREET ADDRESS	
CITY-ST-ZIP	UMATILLA FL	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	VD
NAME	GIBSON, MICHAEL	5.2 NAME	Gibson, Michael
STREET ADDRESS	16880 SE 249 AVENUE	5.3 STREET ADDRESS	16880 SE 249th Avenue
CITY-ST-ZIP	UMATILLA FL	5.4 CITY-ST-ZIP	Umatilla, florida 32784
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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.

SIGNATURE *Sue J. Roudabush* Sue J. Roudabush 04/20/98 (352) 669-3766

CR2E037 (10/97)