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Mar 11 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N93000004138 (4)

1. Corporation Name

AMELIA GARDENS NEIGHBORHOOD ASSOCIATION, INC.



Principal Place of Business

Mailing Address

5330 SW 91ST TERRACE
GAINESVILLE FL 32608
US

5330 SW 91ST TERRACE
GAINESVILLE F 32608-7124
US

3. Date Incorporated or Qualified
09/08/1993

3a. Date of Last Report
05/01/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number
59-3206372

Applied For
Not Applicable

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional Fee Required

22 City & State

27 City & State

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

23 Zip

Country

28 Zip

Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SALTER, JAMES D
703 N.E. FIRST ST.
GAINESVILLE FL 32601

81 Name

Rick Medina

82 Street Address (P.O. Box Number is Not Acceptable)

5330 SW 91st Terrace

83

84 City

Gainesville

FL

85 Zip Code
32608

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

Rick Medina

Rick Medina

2/28/97

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 DST DELETE
NAME KASKEL, MATTHEW
STREET ADDRESS 9120 S.W. 46TH BLVD.
CITY-ST-ZIP GAINESVILLE FL 32608

1.1 TITLE DP Change Addition
1.2 NAME MCELROY, WILLIAM
1.3 STREET ADDRESS 4413 SW 102nd Drive
1.4 CITY-ST-ZIP Gainesville FL 32608

TITLE DV DELETE
NAME FLEEMAN, DAVID B
STREET ADDRESS 9120 S.W. 46TH BLVD.
CITY-ST-ZIP GAINESVILLE FL 32608

2.1 TITLE DV Change Addition
2.2 NAME ANTONSON, DONALD
2.3 STREET ADDRESS 4455 SW 103rd Court
2.4 CITY-ST-ZIP Gainesville FL 32608

TITLE DP DELETE
NAME KRAMER, ROBERT B
STREET ADDRESS 9120 S.W. 46TH BLVD.
CITY-ST-ZIP GAINESVILLE FL 32608

3.1 TITLE DST Change Addition
3.2 NAME WHIPPLE, MARTA
3.3 STREET ADDRESS 4401 SW 101st Drive
3.4 CITY-ST-ZIP Gainesville FL 32608

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
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.

SIGNATURE:

Rick Medina

3/5/97

352-335-7991

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: Rick Medina, President

CR2E037 (9/96)