## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

FILED

Mar 24 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

Principal Place of Business

COMMUNITIES OF FLORIDA

appears in Block 12 or Block 13 it

444 WINDING CRK PL LONGWOOD FL 32791 N93000004718 (3)

Mailing Address

P.O. BOX 915896

LONGWOOD FL 32791-5896

SUNCREST UNIT 6 HOMEOWNERS' ASSOCIATION, INC.

3. Date Incorporated or Qualified 3a. Date of Last Report 10/13/1993 05/01/1996 Applied For 4. FEI Number 2. Principal Place of Business 2a. Mailing Address 59-3247591 Not Applicable 21 26 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State City & State 6. Election Campaign Financing \$5.00 May Be П Trust Fund Contribution Added to Fees 28 23 Country Country Zip 8. This corporation has liability for intangible tax under s. 199.032, Yes No 30 Florida Statutes 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name **ROGER DONLE** 82 Street Address (P.O. Box Number is Not Acceptable) 4125 OAKBERRY DRIVE 83 ORLANDO FL 32817 Zip Code 84 City 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 | am familiar with, and accept the obligations of, Section 617.0503. Florida Statutes. Sugnature: typica or printed name of registered agent and little diapplicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 (96/6) 12. OFFICERS AND DIRECTORS 13. Change Addition DELETE 1.1 TITLE TIME DC DP Roger Donle 1.2 NAME NAME GEORGE JANETOS 4125 Oakberry Drive 1.3 STREET ADDRESS 10816 CHERRY OAK CIRCLE STREET ADDRESS Orlando, FL 32817 1.4 CITY-ST-ZIP CITY-ST-ZIP ORLANDO FL Change Addition DELETE 2.1 TITLE TITLE Glen Bean 22 NAME NAME ROGER DONLE 10805 Cherry Oak Circle 2.3 STREET ADDRESS **4125 OAKBERRY DRIVE** STREET ADDRESS Orlando, FL 32817 2.4 CITY-ST-ZIP ORLANDO FL CITY-ST-ZIP X Change Addition DELETE 3.1 TITLE DST THLE D۷ Joe Petro 3.2 NAME NAME DONELLA COLE 10719 Cherry Oak Circle 10509 CHERRY OAK CIRCLE 3.3 STREET ADDRESS STREET ADDRESS Orlando, FL 32817 3.4. CITY - ST - ZIP ORLANDO FL CHTY-S1-7IP **C**hange Addition DELETE 4.1 TITLE THLE D ns 4.2 NAME NAME PEGGY PETERSON Edgar Gill 4101 Oakberry Drive Orlando, FL 32817 4.3 STREET ADDRESS STREET ADDRESS 10536 CHERRRY OAK CIRCLE ORLANDO FL 44 CITY-ST-ZIP CITY - ST - ZIP Change Addition DELETE 51 TITLE TIT: F n 5.2 NAME CAROL AMOS Jim Drake NAME 10840 CHERRY OAK CIRCLE 5.3 STREET ADDRESS 4120 Oakberry Drive Orlando, FL 32817 STREET ADDRESS 5.4 CITY-ST-ZIP ORLANDO FL CITY - ST - ZIP Change Addition DELETE 1016 6.1 TITLE n JOSEPH PETRO 6.2 NAME NAME 6.3 STREET ADDRESS STREET ADDRESS 10719 CHERRY OAK CIRCLE 6.4 CITY-ST-ZIP CHY-S1-74P 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

3118197

ROSER DONLE, PRESIDENT 407/896-9696