

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N93000005270 (4)

1. Corporation Name

CITIZENS FOR WATERMELON POND, INC.



Principal Place of Business

Mailing Address

P.O. BOX 145
NEWBERRY FL 32669

P.O. BOX 145
NEWBERRY FL 32669

3. Date Incorporated or Qualified
11/15/1993

3a. Date of Last Report
04/05/1995

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

BOYES, PATRICIA F
602 S MAIN ST
GAINESVILLE FL 32601

81 Name

Janine Wingate

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

3121 SW SR 45

83

84 City

Newberry

FL

85

Zip Code

32669

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

Janine Wingate

(NOTE: Registered Agent signature required when reinstating)

DATE

2-15-96

12. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	MORRIS, DAVID F.	
STREET ADDRESS	RT 3 BOX 300V9 N/A	
CITY - ST - ZIP	NEWBERRY FL	
TITLE	VD	<input checked="" type="checkbox"/> DELETE
NAME	MORRIS, DAVID F	
STREET ADDRESS	RT 3 BOX 300U-9	
CITY - ST - ZIP	NEWBERRY FL 32669	
TITLE	SD	<input checked="" type="checkbox"/> DELETE
NAME	ELLISON, SUSAN	
STREET ADDRESS	PO BOX 1704 N/A	
CITY - ST - ZIP	NEWBERRY FL 32669	
TITLE	TD	<input checked="" type="checkbox"/> DELETE
NAME	STEFANELLI, CHARLENE	
STREET ADDRESS	28504 SW 63RD AVE	
CITY - ST - ZIP	NEWBERRY FL 32669	
TITLE	D	<input type="checkbox"/> DELETE
NAME	SMITH, LOUIS	
STREET ADDRESS	P.O. BOX 1560 N/A	
CITY - ST - ZIP	NEWBERRY FL 32669	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	STILL, PAUL	
STREET ADDRESS	RT 1 BOX 133 N/A	
CITY - ST - ZIP	NEWBERRY FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	PP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	Still, Paul	
13 STREET ADDRESS	RT 1 BOX 133 N/A	
14 CITY - ST - ZIP	Newberry, FL 32669	
21 TITLE	SD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	STILL, KATHLEEN M	
23 STREET ADDRESS	RT 1 BOX 133 N/A	
24 CITY - ST - ZIP	Newberry, FL 32669	
31 TITLE	TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	WINGATE, JANINE	
33 STREET ADDRESS	P.O. BOX 170 3121 SW SR 45	
34 CITY - ST - ZIP	Newberry, FL 32669	
41 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME		
43 STREET ADDRESS		
44 CITY - ST - ZIP		
51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME		
53 STREET ADDRESS		
54 CITY - ST - ZIP		
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
64 CITY - ST - ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Janine Wingate
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-15-96

Date

Daytime Phone #

CR2E037 (12/95)