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NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #
1. Corporation Name N94000004295 (1)

AYLESFORD HOMEOWNERS ASSOCIATION, INC.

SEABORD ARBORS MONT 1700 MCMULLEN BOOTH RD CLEARWATER FL 34619 US 2. Principal Place of Business 2a. Mailing Address 2b. Mailing Address 2c. Principal Place of Business 2a. Mailing Address 2b. Mailing Address 2c. Principal Place of Business 2a. Mailing Address 2b. Mailing Address 2c. Election Campaign Financing 2c. Principal Place of Business 2a. Mailing Address 2b. Mailing Address 2c. Election Campaign Financing 2c. Election Campaign Financing 2c. Principal Place of Business 2c. Suite. Apt. #, etc. 2d. Suite. Apt. #, etc. 2d. Election Campaign Financing 2c. Principal Place of Business 2c. Mailing Address 2d. Election Campaign Financing 2d. Added to Fee Required 2d. Principal Place of Status Desired 2d. Trust Fund Contribution 2d. Added to Fee 2d. Principal Place of Business 2d. Applied For Not Applied 2d. FEI Number 2d. Election Campaign Financing 2d. Added to Fee 2d. Principal Place of Status Desired 2d. Election Campaign Financing 2d. Added to Fee 2d. Principal Place of Status Desired 2d. Election Campaign Financing 2d. Added to Fee 2d. Principal Place of Status Desired 2d. Election Campaign Financing 2d. Added to Fee 2d. Principal Financing 2d. Election Campaign Financing 2d. Added to Fee 2d. Principal Financing 2d. Added to Fee 2d. Principal Financing 2d. Added to Fee 2d. Principal Financing 2d. Election Campaign Financing 2d. Added to Fee 2d. Principal Financing 2d. Principal Financing 2d. Election Campaign Financing 2d. Election Campaign Financing 2d. Principal Financing 2d. Principal Financing 2d. Principal Financing 2d. Election Campaign Financing 2d. Election Campaign Financing 2d. Principal Financ	Drinning I Ding	o of Dustage	\$ d = 115								
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CLEARWATER FL 34619 US CLEARWATER FL 34619 US LEARWATER FL 34619				1700 MCMULLEN BOOTH RD CLEARWATER FL 34619			3. Date Incorporated or Qualifie	d			
US 4. FEI Number Applied For Sp-3275976 Not Applied For Sp-3275976 Not Applied For Sp-3275976 Not Applied For Suite, Apt. #, etc. Suite							08/31/1994				
2. Principal Place of Business 2. Mailing Address 2. Principal Place of Business 2. Mailing Address 2. Expression of Status Desired \$8.75 Additional Fee Required \$8.75 Additional Fee Required \$8.75 Additional Fee Required \$8.75 Additional Fee Required \$8.70 May Be \$8.75 Additional Fee Required \$8.70 May Be \$8.75 Additional Fee Required \$8.70 May Be \$8.70 May		LE SAGIA									
Suite, Apt. #, etc. Site Suite, Apt. #, etc. Suite, Apt. #, etc. Site Added to Fees Added					59-3275976			Not Applicab			
22 27 Trust Fund Contribution Added to Fees	21 28 Suite, Apt. #, etc. Suite, Apt. #, etc.						5. Certificate of Status Desired S				
City & State City & State City & State City & State City & State City & State City & State City & State City Country Country Country Country State City Country State City Country State City Country State City Country Street Address of New Registered Agent City Country Street Address of New Registered Agent City				f, etc.			6. Election Campaign Financing	\$5.00 May Be			
23 28 29 30 Country 25 Country 25 29 30 R. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name Street Address of New Registered Agent Name Street Address of New Registered Agent Name Street Address of New Registered Agent Street Address of New Registered Agent Street Address of New Registered Agent Name Nam							Trust Fund Contribution			Added to Fees	
Zip Country Zip Country Zip Country 2ip S 30 S		Re .	— ·	⊢							
Street Address of New Registered Agent 10. Name and Address of New Registered Agent	Zip	Country	Zip	Cour	ntry		8. This corporation owes or has	paid the c	urrent year I	ntangible	
LEIGHTON, LENNARD A C/O SEABOARD ARBORS MANAGEMENT SERVICES 1700 MCMULLEN BOOTH RD, STE C-3 CLEARWATER FL 34619 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 register 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 registere agent. I am lamiliar 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 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD Change Add NAME PECK, RON 12 NAME SIRRET ADDRESS 4850 AYLESFORD DR	24			30						□ No	
LEIGHTON, LENNARD A C/O SEABOARD ARBORS MANAGEMENT SERVICES 1700 MCMULLEN BOOTH RD, STE C-3 CLEARWATER FL 34619 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 register 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 registere agent. I am lamiliar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE SIGNATURE SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ITILE PD DELETE 1.1 TITLE PC Annue. Typed or privated name of registered agent and title if applicable DELETE 1.1 TITLE 1.2 Change Add STREET ADDRESS 1.3 STREET ADDRESS							10. Name and Address of New	Registered	Agent		
C/O SEABOARD ARBORS MANAGEMENT SERVICES 1700 MCMULLEN BOOTH RD, STE C-3 CLEARWATER FL 34619 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 register 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 lamiliar 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 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD DELETE 1.1 TITLE Change Add STREET ADDRESS 4850 AYLESFORD DR] '	81	Name	1				
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Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when relinatating) DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD DELETE 1.1 TITLE NAME PECK, RON 12 NAME STREET ADDRESS 4850 AYLESFORD DR 1.3 STREET ADDRESS	11. Pursuant office or ragent. I a	to the provisions of Sections 6 registered agent, or both, in the am lamiliar with, and accept the	17.0502 and 617.1508, Florida State 3 State of Florida. Such change was 3 obligations of, Section 617.0503, F	lutes, the ab s authorized Florida Stati	bove- by thutes.	named corpor he corporation	ration submits this statement for th n's board of directors. I hereby ac	e purpose cept the ap	of changing pointment a	lts registere is registered	
12. OFFICERS AND DIRECTORS 18. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 TITLE PD DELETE 1.1 TITLE NAME PECK, RON 12 NAME STREET ADDRESS 4650 AYLESFORD DR 1.3 STREET ADDRESS	SIGNATURE										
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NAME YANCEY, ROBERT 22 NAME Muhlhan, Paula street Address 4330 AUSTON WAY 23 STREET ADDRESS 4338 Auston Way	···· -			1		nneree 13	ninan, Paula 30 Augton Wass				
TITLE Change - Add		DOCUTE			4 CITY-ST-ZIP		IM HALDOL, FL		Channe	Additi	
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STREET ADDRESS 4337 AUSION WAT CITY-ST-ZIP PALM HARBOR FL 3.3 STREET ADDRESS 4622 Ayron Terrace 3.4 CITY-ST-ZIP Palm Harbor FI	CERTET ANNOFFE	WINCHELL, LUCIE				ים	Arata Ed				

PALM HARBOR FL 6.4 CITY-ST-ZIP CITY-ST-ZIP 14. 1 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.

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

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D

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

61 TITLE

6 2 NAME

SIGNATURE

TITLE

NAME

NAME

TITLE

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STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY - ST - ZIP

CITY-ST-ZIP

GREENHAUS, JIM

4333 AUSTON WAY

4662 AYLESFORD DR

PALM HARBOR FL

CARNEY, SANDRA

4085 AUSTON WAY

PALM HARBOR FL

SD

KNOTT, THEA

RONATEL M. Pack

DELETE

DELETE

DELETE

3-11-98

Palm Harbor, FL

Palm Harbor, FL

Palm Harbor, FL

4623 Ayron Terrace

4684 Ayron Terrace

Lebens, John

Trump, Frank

FILED

Apr 17 1998 8:00am

Secretary of State

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