

**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

**CORPORATION  
ANNUAL REPORT  
1995**



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

**FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS**

**95 APR -6 AM 9:08**

**DOCUMENT # N94000005776 (9)**

1. Corporation Name

**THE PENNSULA ON LAKE HARRIS PROPERTY OWNERS ASSOCIATION, INC.**

Principal Place of Business

Mailing Address

10400 CR 48  
HOWEY-IN-THE-HILLS FL 34737

10400 CR 48  
HOWEY-IN-THE-HILLS FL 34737

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/23/1994

3a. Date of Last Report

4. FEI Number

57-3285578

Applied For  
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status

\$68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes

Yes  No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PACKING HOUSE BY-PRODUCTS CO.  
10400 CR 48  
HOWEY-IN-THE-HILLS FL 34737

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	DP
NAME	BEAUCHER, ROBERT
STREET ADDRESS	1104 TANGERINE AVE.
CITY-ST-ZIP	HOWEY-IN-THE-HILLS FL 34737
TITLE	D
NAME	LINE, THOMAS P
STREET ADDRESS	1000 NORTH LAKESHORE BLVD.
CITY-ST-ZIP	HOWEY-IN-THE-HILLS FL 34737
TITLE	DVST
NAME	LINE, DONNA B
STREET ADDRESS	1000 NORTH LAKESHORE BLVD.
CITY-ST-ZIP	HOWEY-IN-THE-HILLS FL 34737
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(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 017, Florida Statutes; and that my name appears in Block 12 or Block 13, in whole or on an attachment with an addendum.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/27/95

904-324-3101



**FLORIDA DEPARTMENT OF STATE**  
**Sandra B. Mortham**  
Secretary of State

March 21, 1995

**THE PENINSULA ON LAKE HARRIS PROPERTY OWNERS ASSOCIATIO**  
10400 CR 48  
HOWEY-IN-THE-HILLS, FL 34737

**SUBJECT: THE PENINSULA ON LAKE HARRIS PROPERTY OWNERS**  
**ASSOCIATION, INC.**  
Ref. Number: N94000005776

Please be advised, we have received your Annual Report; however, the document **has not been filed** and is being returned for the following:

An officer or director listed in block 12, block 13 or on an attachment must sign the report in block 14.

After the corrections have been made return the report to: Division of Corporations, P.O. Box 1500, Tallahassee, Florida 32302-1500 within 30 days from the date of this letter.

If you have additional questions or need further assistance, please call the Annual Report Section at (904) 487-6056.

Thank you,

Toyanna Henderson  
Annual Report Section

Letter number: 095A00012636



**FLORIDA DEPARTMENT OF STATE**  
**Sandra B. Mortham**  
Secretary of State

March 21, 1995

MISSION INN RESORTS, INC.  
10400 CR 48  
HOWEY-IN-THE-HILLS, FL 34737US

SUBJECT: MISSION INN RESORTS, INC.  
Ref. Number: K07362

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Thank you,

Toyanna Henderson  
Annual Report Section

Letter number: 495A00012636