

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 30, 1999 8:00 am
Secretary of State

03-30-1999 90019 011 ****70.00

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1. Corporation Name

**COUNTRY LANE ESTATES PROPERTY OWNERS ASSOCIATION
, INC.**

Principal Place of Business

1003 S. FLORIDA AVENUE
LAKELAND FL 33803

Mailing Address

1003 S. FLORIDA AVENUE
LAKELAND FL 33803



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

02/03/1995

4. FEI Number

59-3386837

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

9. Name and Address of Current Registered Agent

BAGWELL, JEFF
1003 S. FLORIDA AVENUE
LAKELAND FL 33803

10. Name and Address of New Registered Agent

81 Name

Woodrow Wilson

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

83

3610 Country Lane

84 City

Lakeland

FL

85 Zip Code

33809

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

Woodrow Wilson

February 27, 1999

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☒ DELETE
NAME BAGWELL, JEFF
STREET ADDRESS 1003 S. FLORIDA AVENUE
CITY-ST-ZIP LAKELAND FL 33803

TITLE D ☒ DELETE
NAME WALKER, RANDY
STREET ADDRESS 101 W. MAIN ST., STE. 200
CITY-ST-ZIP LAKELAND FL 33801

TITLE D ☒ DELETE
NAME BROCK, JOYCE
STREET ADDRESS P.O. BOX 1527 N/A
CITY-ST-ZIP LAKELAND FL 33802

TITLE D ☒ DELETE
NAME RIVERA, MIRIAM
STREET ADDRESS 934 S. GOLDEN RULE COURT
CITY-ST-ZIP LAKELAND FL 33803

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P/D ☒ Change ☐ Addition
1.2 NAME Callins, Brian
1.3 STREET ADDRESS 1025 Country Lane Court
1.4 CITY-ST-ZIP Lakeland, FL 33809 ☒ Change ☐ Addition

2.1 TITLE VP/D
2.2 NAME Dukes, Sharon
2.3 STREET ADDRESS 3725 Country Lane
2.4 CITY-ST-ZIP Lakeland, FL 33809 ☒ Change ☐ Addition

3.1 TITLE S/D
3.2 NAME Stewart, Ingrid
3.3 STREET ADDRESS 1035 Country Lane Court
3.4 CITY-ST-ZIP Lakeland, FL 33809 ☒ Change ☐ Addition

4.1 TITLE T/D
4.2 NAME Reid, Kevin
4.3 STREET ADDRESS 3750 Country Lane
4.4 CITY-ST-ZIP Lakeland, FL 33809 ☐ Change ☐ Addition

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

6.1 TITLE D ☐ Change ☒ Addition
6.2 NAME Wilson, Woodrow
6.3 STREET ADDRESS 3610 Country Lane
6.4 CITY-ST-ZIP Lakeland, FL 33809

14. I 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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

Brian K. Callins 2/27/99 (941) 802-9086

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2F037 (11/98)