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

## NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

## DOCUMENT # N9500001443 (9)

IOLA LAKESIDE VILLAGE ASSOCIATION, INC.				
Principal Place of Business		Malling Address		- I KARAMIRI BIT LIRIDI BITIT BATIT BATIT DESIK ORIST BEKAN STATT DIELL BELADT HUTT SADT
25310 HIGHWAY 54 WEST 25910 HIGHWAY 54 WEST ZEPHYRHILLS FL 33541 2EPHYRHILLS FL 33541				3. Date incorporated or Qualified  03/24/1995  4. FEI Number Applied For  59-3136780 Not Applicable
Principal Place of Business     1		2a. Mailing Address		Certificate of Status Desired     Se.75 Additional Fee Regulred
Suite, Apt. #, etc.		Suite, Apt. #, etc.		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution  Added to Fees
City & State		City & State		7. Is this nonprofit corporation a homeowners association?
Zip	Country	28	Country	☐ Yes ☐ No
24	25		30	8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No
	9. Name and Address of Curre		901	10. Name and Address of New Registered Agent
81 Name ( 0 C )				
JOHNSON, LEONARD H				Dec (D.O. Boy Number is Not Afficiately)
37837 MERIDIAN AVE			<b>"  3537</b>	PACE (P.O. Box Number is Not Agreptable)
SUITE 314			83	
	ITY FL 33525		84 City	lant 71- Oads
DADE OIT PL 33323				ohyphills FL 85 38541
11. Pursuant to the provisions of Sections 617 8502 and 617 7508. 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 the corporation of the corpo				
SIGNATURE 3/5/98				
SIGNATURE .	Signature, typed or printed name of registered ag	eni and title if applicable. (NOTE	Registered Agent signature require	d when reinstating) DATE
12.	<del>, ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</del>	ID DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	HILL, CARL D		1.2 NAME	
STREET ADDRESS	35310 HWY 54		1.3 STREET ADDRESS	
CITY-ST-ZIP	ZEPHYRHILLS FL 33541	E Briese	1.4 CITY-ST-ZIP	
TITLE	VSD	☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	HILL, KIMBERLY A		2.2 NAME	·
STREET ADDRESS	35310 HWY 54		2.3 STREET ADDRESS	
CITY-ST-ZIP	ZEPHYRHILLS FL 33541	E foreste	2.4 CITY-ST-ZIP	
TITLE	D MOUNTO MENO A	DELETE	3.1 TITLE	Change Addition
NAME CYPETY ADDRESS	HOLMES, MERIS A		3.2 NAME 3.3 STREET ADDRESS	
STREET ADDRESS	15908 HWY 54			Į.
TITLE	DADE CITY FL 33525	DELETE	3.4. CITY-ST-ZIP	☐ Change ☐ Addition
NAME	MOODY, LEON		4, 2 NAME	The straight of the straight o
STREET ADDRESS	35310 HIGHWAY 54 WEST		4.3 STREET ADDRESS	
CITY-ST-ZIP	ZEPHYRHILLS FL 33541		4.4 CITY-ST-ZIP	Ì
TITLE		DELETE	5.1 TITLE	Change Addition
NAME			5.2 NAME	· —
STREET ADDRESS			5.3 STREET ADDRESS	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	
TITLE		DELETE	6.1 TITLE	Change Addition
NAME			6.2 NAME	
STREET ADDRESS			6.3 STREET ADDRESS	Ì
CITY-ST-ZIP			6.4 CITY-ST-ZIP	

I hereby certify that the Information supplied with this filing class of quality for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplied annual profests for each exemption in the same legal effect as if made under eath; that I am an officer or director of the corporation of the repotite or director of the corporation of the repotite or director of the corporation of the repotite or director of the corporation of the corporation

SIGNATURE:

3/5/98

(813)782-7705

**FILED** 

Mar 11 1998 8:00am

Secretary of State