

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

• NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **N95000003116 (9)**

1. Corporation Name

ASSOCIATION OF NORTHWOOD NEIGHBORHOODS, INC.



Principal Place of Business

Mailing Address

P O BOX 4074
GAINESVILLE FL 32613

P O BOX 4074
GAINESVILLE FL 32613

3. Date Incorporated or Qualified

06/28/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

4. FEI Number

☒ 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**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**REDOIG, WILLIAM G
2901 NW 57 PLACE
GAINESVILLE FL 32653**

10. Name and Address of New Registered Agent

81 Name **Craig E. Carter**
82 Street Address (P.O. Box Number is Not Acceptable)
2701 NW 57 Place
83
84 City **Gainesville** FL 85 Zip Code **32653**

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 **Craig E. Carter, Association President** DATE **7/15/96**
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP	<input type="checkbox"/> DELETE
PRESIDENT	Craig Carter	2701 NW 57 Pl	Gainesville, FL 32653	<input type="checkbox"/>
	Michelle Carter	2701 NW 57 Pl	Gainesville, FL 32653	<input type="checkbox"/>
				<input type="checkbox"/>
	S Bonnie Reddig	2901 NW 57 Pl	Gainesville, FL 32653	<input type="checkbox"/>
	William Reddig	2901 NW 57 Pl	Gainesville, FL 32653	<input type="checkbox"/>
	Patricia Glenn	5730 NW 28th	Gainesville, FL 32653	<input type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
	Dessie Robinson	2745 NW 55 Blvd	Gainesville, FL 32653	<input type="checkbox"/>
	Verdell Robinson	2745 NW 55 Blvd	Gainesville, FL 32653	<input type="checkbox"/>
3.1 TITLE	3.2 NAME	3.3 STREET ADDRESS	3.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE	4.2 NAME	4.3 STREET ADDRESS	4.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.1 TITLE	5.2 NAME	5.3 STREET ADDRESS	5.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE	6.2 NAME	6.3 STREET ADDRESS	6.4 CITY - ST - ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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:

CRAIG E. CARTER, ASSOCIATION PRESIDENT

Date

Daytime Phone #

0003193

CR2E037 (3/96)