FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998

SIGNATURE:



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

FILED Jun 01 1998 8:00am Secretary of State

DOCUME 1. Corporation Nar	NT N95 000	005105			
Prairie Lake Village HOA, Inc.				li.	AP 1
Principal Place of E	Business	Malling Address		THE STATE OF THE S	- 101 H
1350 ORANGE AVE SUITE 100 WINTER PARK FL 32	1789	P O BOX 1208 WINTER PARK FL 32789-1208 US	1	3. Date Incorporated or Qualified 10/30/95	
US				4. FEI Number 3341229	Ap No
2. Principal Place	of Business	2a. Mailing Address	f Acres T	Certificate of Status Desired	\$8.75 4
Suite, Apt. #, etc	C.	Shife Ant # etc	d-Phillips,Inc		\$5.00 A
22		27 P.O. BOX 1	208	Election Campaign Financing Trust Fund Contribution	Added to
City & State		City & State 28 Winter Par	K.FL	7. Is this nonprofit corporation a home	
Zip	Country	Zip 120C	Country	8. This corporation owes or has paid	
24	25 Name and Address of Curren		<u></u>	Personal Property Tax due June 30 10. Name and Address of New Regis	
•	Hallie and Address of Culter	t uedistaise whatir	81 Name	IV. Halle site Ausross of New York	Meleu Agent
ATTWOOD-PHILLIPS INC			62 Street Addr	ess (P.O. Box Number is Not Acceptable	1
1350 ORANGE AVE				eas (1.0. Dox 14011061 is 1101 Acceptation	,
SUITE 100			63		
WINTER PAR	IK FL 32789		84 City		FL 85 Zip
11. Pursuant to the	e provisions of Sections 617.050	2 and 617.1508, Florida Statutes	s, the above-named corp	poration submits this statement for the pur	
office or re '~'	fored agent, or both, in the State	of Florida. Such change was au aliona of Section 217 0500		poration submits this statement for the pur inn's hoard of directors. I hereby accept	the expolntment as
SIGNATURE	jara Kol	ebb-, LCAM-1	Attwood-Philli	ips, Inc. 400	48 2119 148
12,	OFFICERS ANI	DineciORS	13.	ADDITIONS/CHANGES TO OFFICE	DATE RS AND DIRECTOR
MLE		DELETE	1.1 TILE	5	Change
NAME			12 NAME DO	an Silvestri	حدران صلاب
STREET ADDRESS			1.3 STREET ADDRESS 34	033 Chimney Rock, S louston. TX 7105	54.
CITY-SI-ZIP TITLE		DELETE	1.4 CITY-ST-ZIP 171 2.1 TITLE 1/	louston, Tž 7905	i le €riange
NAME		VILLE	22 NAME	Lika Tauli	On Change
STREET ADDRESS			2.3 STREET ADDRESS 2	iulio Trulli 033 Chimney Rock, S	uite 400
CITY-ST-ZIP			2.4 CITY-ST-ZIP	Duston, X '1'10=	ط د
TITLE	-	DELETE		TD	Change
NAME ;			3.2 NAME Ri	ic Adkins so Park Ave. South, sin <u>ter. Park</u> , FC 3278	Suite 300
CITY-ST-ZIP			8.4. CITY-ST-ZIP	inter Park FL 3298	9-4388
TITLE		☐ DELETE	4.1 TITLE		Change
NAME			4, 2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY+ST-ZIP TITLE		DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		···	5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE 4 [1]	0002543544	☐ Change
NAME CTREET ADDRESS			62 NAME	/02/9801008041	10.11
STREET ADDRESS			6.3 STREET ADDRESS	31.25	1 N/3

14. I hereby certify that the information supplied with this flint does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify that the 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; officer or director of the corporation or the receiver of tystee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name ε Block 12 or Block 13 if changed, or on an attachment with an endress.