FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandrø B. Morthøm

Socretary of State DIVISION OF CORPORATIONS

DOCUMENT # N9600000116 (1)

PAISLEY ASSOCIATION FOR RECREATIONAL KIDS. INC.

Principal Plac	on of Rusinoss	Mailing Address				
Principal Place of Business		Ť				
P.O. BOX 514 PAISLEY FL 32767		P.O. BOX 514 PAISLEY FL 32767			3. Date Incorporated or Qualified	
TAIOCCI IL VE		THISELT TE SETOT			01/08/1996	
					4. FEI Number	Applied For
2 Principal F	Place of Business	2a. Mailing Address			59-3427184	Not Applicable
21	Tude of Existings	26			I D. CERTICATE OF STATUS DESIFED LI TE	.75 Additional see Required
Suite, Apt.	. #, etc	Suite, Apt #, etc.				.00 May Be
22		27				ded to Fees
City & State		City & State			7. Is this nonprofit corporation a homeowners asso	ciation?
23		28			☐ Yes 🔀 No	
Z _i p	Country	Zip	Coun	try	8. This corporation owes or has paid the current ye	
24	25 P. Name and Address of Curren	1 Decisioned & cent	30		Personal Property Tax due June 30. Yes 10, Name and Address of New Registered Agent	M No
	y. Name and Address of Curren	t Hegistered Agent		1 Name	10. Name and Address of New Registered Agent	
41,1000	10 to 11 to		"	/	MELVIN R SHERMAN	
SHIPES, JOE W			ε	2 Street Ad	dress (P.O. Box Number is Not Acceptable)	
43809 SUNSET DRIVE			-	3 4.2	247 MAGGIE JONES TO.	
PAISLEY	fl 32767			"		
}			E	City Q	risley FL 85	Zip Code 32767
11. Pursuant	to the provisions of Sections 617.050	2 and 617 1508. Florida Sta	atutes, the abo	ve-named co	proporation submits this statement for the purpose of change	ning its registered
office or	registered agent, or both, in the State	of Florida. Such change wa	as authorized	by the corpo	ration's board of directors. I hereby accept the appointment	ent as registered
1	am familiar with, and accept the obliga	allors of Section 617.0503,	, Florida Statu	(es.	SHERMAN 2-3-	60
SIGNATURE	Supuline lyped to protect harve of real should a re-	thruseum (I applicable (I	NOTE Registered	VIO IC	SHERMAN 2-3- quired when reinstalling) DATE	10
12.	OFFICERS AND		13.	<u> </u>	ADDITIONS/CHANGES TO OFFICERS AND DIRE	CTORS IN 12
TITLE	DP	DELETE	1.1 TITL	1	P	nange 🔀 Addition
NAME	SHIPES, JOE W		1.2 NAM	E -	SHERMAN, MELVIN R.	
STREET ADDRESS	43809 SUNSET DRIVE		1.3 STRI		42247 MAGGIE VONES RO.	
CITY-ST-ZIP	PAISLEY FL 32767		1.4 CITY	-ST-ZIP	PAISLEY FL 32767	
TITLE	DVT	DELETE	2.1 TrTL		DVP	nange 🔀 Addition
NAME	SHERMAN, EILEEN		2.2 NAM	E	DUINN, LOIS 43651 GRACIE DR.	
STREET ADDRESS	26425 ORANGE CIRCLE		2.3 STRE	I		
CITY-ST-ZIP	PAISLEY FL 32767		2 4 CIT		PAISLEY FL 32767	
TITLE	DS	DELETE	3.1 TiTL	٠ ٦	CD O	nange 🔀 Addition
NAME	HUNTER, CYNTHIA		3.2 NAM	E 1	SHERMAN, KINIBERLY 15339 MARDON EIR!	
STREET ADDRESS	26428 PALMETTO CIRCLE					
CITY-ST-ZIP	PAISLEY FL 32767	NZ perexe			PAISLEY FL 32767	4489
THLE	TD SUFFRIEND WEEK O	DELETE	4.1 TITU		D	ange K Addition
NAME	SHERMAN, ILEEN S		4 2 NAM	(E	SHERMAN, EILGEN S. 42247 MAGGIB JONES RO,	
STREET ADDRESS	42247 MAGGIE JONES ROAD		T		ALLAI MAGGIO JONES ICO.	
CITY - ST - ZIP	PAISLEY FL		4.4 CITY	-ST-ZIP		
TITLE	D	DELETE	£ 4 7.7.		PAISLEY 1=2 32767	anga Måddition
L NAME	D DEDWIN LAMAD A	☐ DEL€TE	5.1 TITLE	7	PAISLEY 1=2 32767	nange Maddition
1	D LOUDERWILK, LAMAR A	DELETE	5.2 NAM	7	PAISLEY 1=2 32767	ange Addition
STREET ADDRESS	43750 DIXIE DRIVE	DELETE	5.2 NAM 5.3 STRE	E E1 ADDRESS	PAISLEY 1=2 32767 D	Pange Addition
STREET ADDRESS CITY - ST - ZIP	43750 DIXIE DRIVE PAISLEY FL		5.2 NAM 5.3 STRE 5.4 CITY	E E1 ADDRESS - ST- ZIP	PAISLEY 1=2 32767 D.	
STREET ADDRESS	43750 DIXIE DRIVE	☐ DELETE	5.2 NAM 5.3 STRE	E E1 ADDRESS - ST- ZIP	PAISLEY 1=2 32767 D	

14. Thereby 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 chappend, or on an attachment with an analysis.

SIGNATURE:

UMATILLA FL

STREET ADDRESS CITY-ST-ZIP

MELUIN R SHERMAN 23-98 383-4156

FILED

Feb 18 1998 8:00am

Secretary of State