## **FILE NOW: FILING FEE IS \$61.25** NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

N96000002783 (6)

POMELLO PARK RANCHES HOMEOWNERS' ASSOCIATION, IN

Principal Place of Business CON ANTIL PROPERT COUNTY Mailing Address

SAS ABTH STREET COURT F

## **FILED** May 19 1997 8:00am Secretary of State



BRADENTON I	FL 34208	BRADENTON FL 34208-5508										
						3. Date incorpo 05/24	rated or Qualified	<b>3a.</b> Da	te of Last	Report		
2. Principal P	lace of Business	2a. Mailing Address				4. FEI Number Applied For Not Applied For						
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired S8.75 Additional Fee Required			Additional			
City & Stat	е	City & State				6. Election Can Trust Fund C	paign Financing ontribution	\$5.00 May Be Added to Fees				
Zip	Country	Zip	Cou	ntry		<del></del>	ion has liability for in					
24	25	29	30			Florida Statul		Yes [				
	9. Name and Address of Currel	nt Registered Agent				10. Name and A	ddress of New Reg	gistered /	Agent			
				81	Name							
	S, CALEB J					82 Street Address (P.O. Box Number is Not Acceptable)						
	ANATEE AVENUE WEST			83								
RHADE	NTON FL 34205											
				84	City			FL	<b>85</b> Zip	Code		
	to the provisions of Sections 617.050 registered agent, or both, in the State am familiar with, and accept the oblig	J2 and 617.1508, Florida Sta of Florida. Such change wa ations of, Section 617.0503,	tutes, the ai is authorize Florida Stat	bove- d by t ates.	named corpo the corporation	oration submits this on's board of direc	statement for the pl tors. I hereby accep	urpose of t the app	changing ointment a	its registered s registered		
SIGNATURE	Signature, typed or printed name of registered ag-	ent and title if applicable (N	IOTE: Registere	d Agent	t signature require	ed when reinstating)	<del></del>	DATE				
12.	OFFICERS AN	D DIRECTORS	13.			<del></del>	HANGES TO OFFIC					
TrTLE		☐ DELETE	1.1 11				(Director	r)	Change	Addition		
NAME			1.2 N/			nomas B.						
STREET ADDRESS							St. Ct.					
CITY-ST-ZIP		DELETE	1.4 CI 2.1 Ti	TY-ST-			FL 3420	18	Change	X Addition		
NAME		blecit	2.1 H			ec'y (Di			Car Change	ADDITION		
STREET ADDRESS						ntonie Ve						
CITY-ST-ZIP				ITY-ST	30		St. Ct.					
TITLE		DELFTE	3.1 TI				-FL 34200		Change	Addition		
NAME			3.2 N/	AME			(Director			,		
STREET ADDRESS			3.3 \$1	REET A	DDRESS TO	IOMAS B.	Brown, Ji	D				
CITY-ST-ZIP			3.4. C	ITY - ST	-ZIP 5 U	oz – 48th	St. Ct.	上。 10		·		
TITLE		☐ DELETE	4.1 TI	TLE	BI	auenton,	FL 3420	フローコご	<b>1 Ø</b> hange	Addition		
NAME			4. 2 N	AME								
STREET ADDRESS			1		DORESS							
CITY-ST-ZIP		Dec exe		TY- ST-	- ZIP				T Observe	[ a a a pp		
TITLE		☐ DELETE	5.1 TI		}				☐ Change	☐ Addition		
NAME			5.2 N/		BDD500					05		
STREET ADORESS					DDRESS					5/19/97		
CITY-ST-ZIP TITLE		DELETE	5.4 C(	TY - 51 -	- 217				Change	Addition		
NAME		_ otter	6.1 II						C Dimigo	LI AUGITION		
STREET ADDRESS					DDRESS				K.			
CITY-ST-ZIP	•			IY-ST-			(AL	e Do	00%	1.25		
44 )	l	distributed filtra alama and a	al-fu for the	, 1 - 01	notion stated	in Continu 110 07/	W/V Clasido Ctatutas	<i>سلاما</i> ـــ	- <u>- 4 (</u>	1.41		

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.

Thomas B. Brown