

FILE NOW: FILING FEE IS \$61.25

FILED
Apr 15 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N96000002939 (4)
1. Corporation Name
THE GEORGETOWN ESTATES/WINTER PARK FOREST HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business 821 CHIPLEY COURT WINTER PARK FL 32792	Mailing Address 821 CHIPLEY COURT WINTER PARK FL 32792-2909
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2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 05/28/1996	3a. Date of Last Report 1/1/97
21 Suite, Apt. #, etc.	22 City & State	26 Suite, Apt. #, etc.	27 City & State	4. FEI Number 59-2804384	Applied For Not Applicable
24 Zip	25 Country	29 Zip	30 Country	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	

ROBLES, MILDRED
821 CHIPLEY COURT
WINTER PARK FL 32792

81 Name	82 Street Address (P.O. Box Number is Not Acceptable)	83	84 City	85 Zip Code
			FL	

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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when resigning)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ROBLES, MILDRED	1.2 NAME	
STREET ADDRESS	821 CHIPLEY COURT	1.3 STREET ADDRESS	
CITY-ST-ZIP	WINTER PARK FL 32792	1.4 CITY-ST-ZIP	
TITLE	VPD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ALLEN, JIM	2.2 NAME	
STREET ADDRESS	814 GUTHRIE COURT	2.3 STREET ADDRESS	
CITY-ST-ZIP	WINTER PARK FL 32792	2.4 CITY-ST-ZIP	
TITLE	SD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PRESHA, SUSAN	3.2 NAME	
STREET ADDRESS	820 CHIPLEY COURT	3.3 STREET ADDRESS	
CITY-ST-ZIP	WINTER PARK FL 32792	3.4 CITY-ST-ZIP	
TITLE	TD	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DEVLIN, SUZETTE	4.2 NAME	
STREET ADDRESS	3328 RAIDERS RUN	4.3 STREET ADDRESS	
CITY-ST-ZIP	WINTER PARK FL 32792	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WAGNER, SHARON	5.2 NAME	
STREET ADDRESS	3120 THISTLEHILL DRIVE	5.3 STREET ADDRESS	
CITY-ST-ZIP	WINTER PARK FL 32792	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LIMA, PETE	6.2 NAME	
STREET ADDRESS	611 HERITAGE BOULEVARD	6.3 STREET ADDRESS	
CITY-ST-ZIP	WINTER PARK FL 32792	6.4 CITY-ST-ZIP	

14. I do hereby 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 changed, or on an attachment with an address.

SIGNATURE: *Mildred Robles President Director* **4/15/97**

CR2E037 (9/96)