FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF COMPORATIONS

1997
DOCUMENT #

N96000004003 (7)

SPRINGLAKE WEST HOMEOWNERS' ASSOCIATION, INC

	ce of Business	Mailing Address						
226 S. PALAFOX STREET NINTH FLOOR - SEVILLE TOWER PENSACOLA FL 32501		226 S. PALAFOX STREET NINTH FLOOR - SEVILLE TOWER PENSACOLA FL 32501-4841		3. Date Incorporated or Qualified 3a. Date of Last Report 07/31/1996				
~~~~ <u>′</u>	Place of Business	2a. Mailing Address	<del></del>		4. FELNupoper 3441:	379	<del></del>	plied For
Suite, Apt	t. #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		\$8.75 / Fee Re	Additional
City & Sta	ate	City & State	···········		6. Election Campaign Financing	<del></del>	\$5.00	May Be
23		28			Trust Fund Contribution		Added	
Zip	Country	Zip	Count	ry	8. This corporation has liability f			199.032,
24	25	29	30		Florida Statutes	Yes [		
	9. Name and Address of Curre	nt Hegistered Agent	8	I Name	10. Name and Address of New	Mediateted 1	19eus	
			Ľ	I Mariko				
FLEMING, FLETCHER			8	2 Street Ad	Idress (P.O. Box Number is Not Accep	table)		
	PALAFOX STREET		8:	3				
	FLOOR - SEVILLE TOWER							
PENSA	ACOLA FL 32501		В	4 City		FL	85 Zip (	Code
11 Digerion	to the provisions of Sections 617.06	02 and 617 1508 Florida Sta	utec the sho	ve-nemed or	venoration submits this statement for th		chengino fi	e renieterer
office or	registered agent, or both, in the State	e of Florida. Such change wa	s authorized b	by the corpor	orporation submits this statement for the ration's board of directors. I hereby ac	cept the app	pintment as	registered
agent. I	am fahiliar with, and accept the oblig	ations of, Section 617.0503,	Florida Statute	88.				
SIGNATURE			255 B 12			6174		
12.	Signature, typed or printed name of registered ag	yent and little if applicable. (N	13.	gent signature rec	quired when reinetating) ADDITIONS/CHANGES TO OF	DATE FICERS AND	DIRECTOR	S IN 12
TITLE	STD	DELETE	1.1 TITLE	T	ADDITIONS OF INVOCES TO ST	T IOCHO 741D	Change	Addition
NAME	FLEMING, FLETCHER		1.2 NAME	ļ	•		<b></b>	
STREET ADORESS	AAA A AM ARAW ATTER			ET ADORESS				
	PENSACOLA FL 32501		1	1				
CITY-ST-ZIP TITLE	VD	DELETE	1.4 City- 2.1 Title			·····	Change	Addition
NAME	LOADHOLTZ, GENE	the present	2.2 NAM	• •			Fred Control Ap	
STREET ADDRESS	A	1		ET ADDRESS	•			
	PENSACOLA FL 32504	<i>'</i>	1			•		
CITY-ST-ZIP TITLE	PD	DELETE	2.4 C/TY 3.1 TITLE				Change	Additio
NAME	ROBERTS, DONNA A		3.2 NAM	1			Free avenilla	/ NO.1101
STREET ADDRESS				: 1				
-	TOAK HE DO WEET			1				
	1		3.3 STRE	ET ADDRESS				
CITY-ST-ZIP	PENSACOLA FL 32506	T DELETE	3.3 STRE 3.4. City	ET ADDRESS -ST-ZIP			Change	Addition
TITLE	1	☐ DELETE	3.3 STREI 3.4. CITY 4.1 TITLE	ET ADDRESS -ST-ZIP			Change	☐ Addition
TITLE NAME	PENSACOLA FL 32506	☐ DELETE	3.3 STRE 3.4. CITY 4.1 TITLE 4. 2 NAM	ET ADDRESS -ST-ZIP			☐ Change	Addition
TITLE NAME STREET ADDRESS	PENSACOLA FL 32506	☐ DELETE	3.3 STREI 3.4. CITY 4.1 TITLE 4.2 NAM 4.3 STREI	ET ADDRESS -ST-ZIP IE ET ADDRESS			☐ Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PENSACOLA FL 32506	_	3.3 STRE 3.4. CITY 4.1 TITLE 4. 2 NAM 4.3 STREI 4.4 CITY	ET ADDRESS -ST-ZIP -ST-ZIP -ST-ZIP -ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PENSACOLA FL 32506	☐ DELETE	3.3 STREI 3.4, CHY 4.1 TITLE 4.2 NAM 4.3 STREI 4.4 CHY 5.1 TITLE	ET ADDRESS -ST-ZIP  IE ET ADORESS -ST-ZIP			Change	
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PENSACOLA FL 32506	_	3.3 STRE 3.4. CITY 4.1 TITLE 4.2 NAM 4.3 STRE 4.4 CITY- 5.1 YITLE 5.2 NAM	ET ADDRESS -ST-ZIP  IE ET ADDRESS -ST-ZIP				
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	PENSACOLA FL 32506	_	3.3 STRE 3.4. CHY 4.1 TITLE 4.2 NAM 4.3 STRE 4.4 CHY 5.1 TITLE 5.2 NAM 5.3 STRE	ET ADDRESS -ST-ZIP ET ADDRESS -ST-ZIP E ET ADDRESS				
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	PENSACOLA FL 32506	☐ DELETE	3.3 STRE 3.4. CHY 4.1 TITLE 4.2 NAM 4.3 STRE 4.4 CHY 5.1 TITLE 5.2 NAM 5.3 STRE 5.4 CHY	ET ADDRESS -ST-ZIP  EE ADDRESS -ST-ZIP  ET ADDRESS -ST-ZIP			Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PENSACOLA FL 32506	_	3.3 STRE 3.4. CHY 4.1 TITLE 4.2 NAM 4.3 STRE 4.4 CHY 5.1 TITLE 5.2 NAM 5.3 STRE 5.4 CHY 6.1 TITLE	ET ADDRESS -ST-ZIP  ET ADDRESS -ST-ZIP  ET ADDRESS -ST-ZIP				Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	PENSACOLA FL 32506	☐ DELETE	3.3 STRE 3.4. CHY 4.1 TITLE 4. 2 NAM 4.3 STRE 4.4 CHY 5.1 TITLE 5.2 NAM 5.3 STRE 5.4 CHY 6.1 TITLE 6.2 NAM	ET ADDRESS -ST-ZIP  EE ADDRESS -ST-ZIP  E ADDRESS -ST-ZIP  ET ADDRESS -ST-ZIP			Change	Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	PENSACOLA FL 32506	☐ DELETE	3.3 STRE 3.4. CHY 4.1 TITLE 4. 2 NAM 4.3 STRE 4.4 CHY 5.1 TITLE 5.2 NAM 5.3 STRE 5.4 CHY 6.1 TITLE 6.2 NAM 6.3 STRE	ET ADDRESS -ST-ZIP  ET ADDRESS -ST-ZIP  ET ADDRESS -ST-ZIP			Change	Addition Addition

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 of page of an attach florid an address.

SIGNATURE

April 3, 1997 (904) 4342411

**FILED** 

May 20 1997 8:00am

Secretary of State