FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

N9600005108 (3) DOCUMENT

FRIENDS OF LAKE KILLARNEY, INC.

FILED Feb 06 1998 8:00am Secretary of State

Principal Place of Business Mailing Address					T TOURSTON WER TRAIN RAILS ORDER ORDER ORDER BRITE BRITE BRITE BRITE BLIEF CONTROL BRITE B
JAMES CUNNINGHAM JAMES CUNNINGHAI					3. Date Incorporated or Qualified
251 RIPPLING I		251 RIPPLING LN WINTER PARK FL 32789			10/04/1996
WINTER PARK TE 02/03					4. FEI Number Applied For
					59-3434458 Not Applicable
└	Place of Business	2a. Mailing Address			5. Certificate of Status Desired S8.75 Additional
Suite, Apt.	#. etc.	Suite, Apt. #, etc.			Fee Required
22		27			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution
City & State		City & State			7. Is this nonprofit corporation a homeowners association?
Zip Country		Zip Country		2/	☐ Yes No
24 25		29 30		У	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
9. Name and Address of Curren					10. Name and Address of New Registered Agent
			8	l Name	· · · · · · · · · · · · · · · · · · ·
CUNNIN	GHAM, JAMES		8:	2 Street Ac	Idress (P.O. Box Number is Not Acceptable)
251 RIPPLING LN					<u>'</u>
WINTER PARK FL 32789			8:	5	
			84	City	FI 85 Zip Code
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above				ve-named co	
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					
Signature, typed or printed name of registered agent and title if applicable. (NOTE: R				gent signature re	quired when reinstating) DATE
12.	OFFICERS AN	D DIRECTORS	13.	<u> </u>	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE		T percie	1.1 TITLE	1	Change Addition
STREET ADDRESS	CUNNINGHAM, JAMES O 251 RIPPLING LANE		1,2 NAME	1	
CITY-ST-ZP	WINTER PARK FL 32789		1.4 CITY-	T ADDRESS	
TITLE	D	☐ DELETE	2.1 TITLE	51-ZIP	Change Addition
NAME	NORTHAM, NORT		2.2 NAME		
STREET ADDRESS	120 BROADVIEW AVENUE			T ADDRESS	
CITY-ST-ZIP	WINTER PARK FL 32789		2. 4 CITY		
TITLE	D	DELETE	3.1 TITLE	01 LII	Change Addition
NAME	JONES, SCOTT		3,2 NAME		•
STREET ADDRESS	2016 LAKE DRIVE		3.3 STREE	T ADDRESS	
CITY-ST-ZIP	WINTER PARK FL 32789		3.4. CITY-	ST-7IP	
TITLE	D	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	MINES, JOHN		4, 2 NAME		
STREET ADDRESS	1991 KILLARNEY DRIVE		4.3 STREET ADDRESS		
C/TY-ST-ZIP	WINTER PARK FL 32789		4.4 CITY-		
TITLE	D	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	NECRASON, CONRAD		5.2 NAME		
STREET ADERESS	2130 LAKE DRIVE		5.3 STREET ADDRESS		
CITY-ST-ZIP	WINTER PARK FL 32789		5.4 CITY-		
TITLE	D	☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME	PALM, JANINE		6.2 NAME		
STREET ADDRESS	245 RIPPLING LANE	6.3 STR		T ADDRESS	
CITY-ST-ZIP WINTER PARK FL 32789			6.4 CITY-ST-ZIP		

I hereby certify that the information supplied with this filing does not qualifindicated on this annual report or supplemental annual report is kue and officer or director of the corporation or the receiver or trustee syn not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information and accurate and that my signature shall have the same legal effect as if made under oath; that I am an appeared to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in

SIGNATURE: