

528-98 B-1855 c
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FILED
May 28 1998 8:00am
Secretary of State

NONPROFIT CORPORATION, ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N96000005977 (1)

1. Corporation Name

WASHINGTON PARK NEIGHBORHOOD ASSOCIATION, INC.

Principal Place of Business

4800 LENOX BLVD.
ORLANDO FL 32811
US

Mailing Address

4800 LENOX BLVD.
ORLANDO FL 32811
US

2. Principal Place of Business

21 1030 Campanella Ave.

Suite, Apt. #, etc.

City & State

23 Orlando, FL

Zip

24 32811

Country

25 Orange

2a. Mailing Address

26 1030 Campanella Ave.

Suite, Apt. #, etc.

City & State

28 Orlando, FL 32811

Zip

29 32811

Country

30 Orange

9. Name and Address of Current Registered Agent

WATSON, BOBBY
4800 LENOX BLVD.
ORLANDO FL 32811

3. Date Incorporated or Qualified

11/18/1996

4. FEI Number

59-3436842

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

☐ \$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association?

☒ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.

☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name

RaZzie Smith

82 Street Address (P.O. Box Number is Not Acceptable)

1030 Campanella Ave.

83

84 City

Orlando

FL

85 Zip Code

32811

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

RaZzie Smith

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

5-21-98

12. OFFICERS AND DIRECTORS

TITLE ☒ DELETE

NAME
CD
WATSON, BOBBY
STREET ADDRESS
4800 LENOX BLVD.
CITY-ST-ZIP
ORLANDO FL

TITLE ☒ DELETE

NAME
T
PIERRE, SHARON
STREET ADDRESS
4555 LENOX BLVD.
CITY-ST-ZIP
ORLANDO FL

TITLE ☐ DELETE

NAME
T
SANDERS, JUANITA
STREET ADDRESS
4519 LENOX RD.
CITY-ST-ZIP
ORLANDO FL

TITLE ☐ DELETE

NAME
T
DAVIS, MARY
STREET ADDRESS
4837 LENOX BLVD.
CITY-ST-ZIP
ORLANDO FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☒ Addition

1.2 NAME
President
RaZzie Smith
1.3 STREET ADDRESS
1030 Campanella Ave.
1.4 CITY-ST-ZIP
Orlando, FL 32811

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME
Vice President
Bobby Watson
2.3 STREET ADDRESS
4800 Lenox Blvd.
2.4 CITY-ST-ZIP
Orlando, FL 32811

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME
Secretary
Mary Davis
3.3 STREET ADDRESS
4637 Lenox Blvd.
3.4 CITY-ST-ZIP
Orlando, FL 32811

4.1 TITLE ☐ Change ☒ Addition

4.2 NAME
Treasurer
Juanita Sanders
4.3 STREET ADDRESS
4519 Lenox Blvd.
4.4 CITY-ST-ZIP
Orlando, FL 32811

5.1 TITLE ☐ Change ☒ Addition

5.2 NAME
Sergeant at Arms
Josephine Watson
5.3 STREET ADDRESS
4600 Lenox Blvd.
5.4 CITY-ST-ZIP
Orlando, FL 32811

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I 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

RaZzie Smith 4-27-98

CR2E037 (10/97)