FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sendra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

N96000006198 (3) DOCUMENT #

DIXIE CROSSINGS HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business

Mailing Address

5591 150 AVE., NORTH CLEARWATER FL 34620

SIGNATURE:

5591 150 AVE., NORTH CLEARWATER FL 34620

FILED Apr 16 1998 8:00am Secretary of State

Applied For

3. Date Incorporated or Qualified 12/05/1996

4. FEI Number

					59-3437102		Not Applicable			
2. Principal Pl	ace of Business DROOSEVELT BLV	28. Mailing Address 28. 5610 - ROOSE	EVEL	J BLVD	5. Certificate of Status Desired		5 Additional Required			
Suite, Apt.	ii, etc.	Suite, Apt. #, etc.		6. Election Campaign Financing		D May Be				
22		27		Trust Fund Contribution	·	to Fees				
City & State City & State				7. Is this nonprofit corporation a homeowners association?			tion?			
23 CLEARWATER 28 FLORIDA Zip Country			Country				Intensible .			
コンススク	60 25 USA	29 30	a '		NA Personal Property Tax due June		ON NA			
	9. Name and Address of Current		"		10. Name and Address of New Re					
		,,, T, ,, , , , , , , , , , , , , , , ,	81	Name						
D&BC	ORPORATE SERVICES, INC.		82 Street Address (P.O. Box Number is Not Acceptable)							
5999 CENTRAL AVE.				Street Address (P.O. Box Number is Not Acceptable)						
SUITE 2			83	83						
	ERSBURG FL 33710		اجما	- C/2		lee 7	in Code			
				84 City FL 85 Zip Code						
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 _				nt signature required		DATE				
12.				nt angressore response	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
TITLE	D	☐ DELETE	13. 1.1 TITLE			Chang	e Addition			
NAME	HOYT, JEFFERY M		1.2 NAME							
STREET ADDRESS	5591 150 AVE., NORTH		1.3 STREET	ADDRESS						
CITY-ST-ZIP	CLEARWATER FL 34620		1.4 CHTY - S				i			
TITLE	D	☐ DELETE	2.1 TITLE			☐ Chang	e Addition			
NAME	DOYLE, ARTHUR T		2.2 NAME							
STREET ADDRESS	1717 DONCASTER ROAD		2.3 STREET	ADDRESS						
CITY+ST-ZIP	CLEARWATER FL 34624		2. 4 CITY - S	T-ZIP						
TITLE	D	DELETE	3.1 TITLE			☐ Chang	pa 🔲 Addition			
NAME	ROBERTSON, SANDRA		3.2 NAME							
STREET ADDRESS	8108 6TH STREET NORTH		3.3 STREET	ADDRESS						
CITY-ST-ZIP	ST. PETERSBURG FL 33702		3.4. CITY - S	IT-ZIP						
TITLE		☐ DELETE	4.1 TITLE			Chang	pe 📋 Addition			
NAME			4. 2 NAME							
STREET ADDRESS			4.3 STREET	ADDRESS			ļ			
CITY - ST - ZIP		·····	4.4 CITY-S	T-ZIP						
TITLE		☐ DELETE	5.1 TITLE			Chang	ge ∐ Addition			
NAME			5.2 NAME							
STREET ADDRESS			5.3 STREET							
CITY-ST-ZVP			5.4 CITY-S	T-ZIP		Chang	ne Addition			
TITLE		☐ DELETE	6.1 TITLE			L Unang	No CT MODITION			
NAME			8.2 NAME							
STREET ADDRESS			6.3 STREET	Ì						
CITY-ST-ZIP		this filing does not quelify for	6.4 CITY - S	T-ZIP	Section 119 07(3)(i) Florida Statutas	I further certify that	the information			
indicated officer or	certify that the information supplied with on this annual report of supplemental director of the corporation of the recei- or Block 13 if changed, or on an attack	annual report is true and accur yer or trustee empowered to ex	ate and the ecute this	at my signature report as requi	e shall have the same legal effect as ired by Chapter 617, Florida Statutes;	if made under oath; and that my name	that I am an appears in			
Block 12	of Block 13 it changed, of 90 80 80 80 80	iment with a n accress.								

BEOURED