FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1**9**98



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N97000001590 (5) HARGETT LANE OWNERS ASSOCIATION. INC. Principal Place of Business Mailing Address 3000 Hargett Lane 3000 HARGETT LANE 3. Date Incorporated or Qualified SAFETY HARBOR FL 34695 SAFETY HARBOR FL 34695 03/21/1997 4. FEI Number Applied For 345 45 18 Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 5. Certificate of Status Desired 21 26 Fee Required Sulte, Apt. #, etc. Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees 27 22 City & State City & State 7. Is this nonprofit corporation a homeowners association? Yes No 23 28 Zip Country Zip Country 8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes 24 25 29 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent CRONIN, JOHN H JR. 82 Street Address (P.O. Box Number is Not Acceptable) 3011 HARGETT LANE 83 SAFETY HARBOR FL 34695 City 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, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Change TITLE DELETE 1.1 TITLE Addition COTTON, LARRY JOE NAME 1.2 NAME **3000 HARGETT LANE** 1.3 STREET ADDRESS STREET ADORESS **SAFETY HARBOR FL 34695** 1.4 CITY - ST - ZIP CITY-ST-ZIP DELETE Channe Addition 2.1 TITLE TITLE TARTAGLIA, SUSAN NAME 2.2 NAME 2547 SPLITWOOD WAY 2.3 STREET ADDRESS STREET ADDRESS **CLEARWATER FL 34621** CITY-ST-ZIP 2.4 CITY - ST- ZIP DELETE Change Addition TITLE 3.1 TITLE NAME CRONIN, JOHN H JR. 3.2 NAME **3011 HARGETT LANE** 9.3 STREET ADDRESS STREET ADDRESS **SAFETY LANE FL 34895** 3.4. CITY-ST-ZIP CITY-ST-ZIP Change DELETE ☐ Addition TITLE 4.1 TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE NAME 5.2 NAME 5.3 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP 5.4 CITY-\$T-ZIP DELETE Addition 6.1 TITLE TITLE NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS

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.

6.4 CITY-ST-ZIP

CITY-ST-ZIP

FILED

May 20 1998 8:00am

Secretary of State

(10/97)