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

DOCUMENT #

N97000002591 (2)

SOUTHWINDS MOBILE HOMEOWNERS' ASSOCIATION, INC., OF LAKELAND

Principal Place of Business 1425 RITTER ROAD LOT #23 LAKELAND FL \$3810

SIGNATURE:

Mailing Address

1425 RITTER ROAD LOT #23 LAKELAND FL 33810

FILED May 01 1998 8:00am Secretary of State



Not Applicable

05/07/1997

4. FEI Number - 07/15353

2. Principal P	S Ritter Rd	28. Mailing Address 26. 1425 Rith	erRo	4	5. Certificate of Status Desired	□ \$8.75 Ac Fee Req		
Suite, Apt.	1, etc. Sulte. Apr. W. etc. 27 Lot 12				Election Campaign Financing Trust Fund Contribution Added to Fees			
23 Lakeland. Florida 20 Lakeland. F				orida	7. Is this nonprofit corporation a homeowners association? Yes X No			
Zip 33	21p 33810 Country 21p 33810 30				8. This corporation owes or has paid the current year intengible Personal Property Tax due June 30. Yes No			
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent				
				81 Name				
OPOSSOV ABOLISTI I								
1342 E VINE STREET SUITE 238 MISSINGE EL 24744				82 Street Address (P.O. Box Number is Not Acceptable)				
				83				
				City		85 Zip Co	vie 	
			84	City		FL M P	~~	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above					ration submits this statement for the pu	roose 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 Statutés.								
SIGNATURE								
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agent signature required when reinstating) DATE								
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICE			
TITLE	D	DELETE	1.1 TITLE	1)	Change	☐ Addition	
NAME	Brakla, Lee		1.2 NAME	'4	sterves Dill			
STREET ADDRESS	1425 RITTER ROAD LOT #23		1.3 STREET	ADDRESS	imas rither by #	バス	<u>'</u>	
					a Keland El. 3	3810		
CITY-ST-ZIP	LAKELAND FL 33810		1.4 CITY-S	T-ZIP			Carrier .	
TITLE	D	OELETE	2.1 TITLE		(1	☐ Change	Addition	
HAME	BENTLEY, VIC		2.2 NAME	1	STESVES MULTO	STOR.		
STREET ADDRESS	1425 RITTER ROAD LOT #23		2.3 STREET	ADDRESS	THE KITTEN KO	井12	ĺ	
CITY-ST-ZIP	LAKELAND FL 33810		2.4 CITY-5	IT-ZIP	Lakeland, Fl.	33810		
TITLE	D	☐ DELETE	3.1 TITLE			Change	Addition	
NAME	BENTLEY, LUCY	_	3.2 NAME	} ~	Bentley I you			
STREET ADDRESS	1425 RITTER ROAD LOT #23		3.3 STREET	ADDRESS	MAN STATE OF THE S	上つ		
					files thinks the	ぶつのい		
CITY-ST-ZIP	LAKELAND FL 33810	T DELETE	3.4. CITY - S	1-ZIP	FRUEIGUA FI	33010	L Addition	
TITLE	D	DELETE	4.1 TITLE	1	No C	∆ Change	Addition	
NAME	STEEVES, BILL		4. 2 NAME	'	LIEM 25 WE JOHN	₹ ८ %		
STREET ADDRESS	1425 RITTER ROAD LOT #23		4.3 STREET	ADDRESS	HYS RITTEL KG	元化。		
CITY-ST-ZIP	LAKELAND FL 33810		4.4 CITY-S	r-zip	Lakeland F)	<u> 23810</u>		
TITLE	0	DELETE	6.1 TITLE	1		☐ Change	Addition	
NAME	MILLER, HARRY		5.2 NAME	•	Willer . Hawnu			
STREET ADDRESS	1425 RITTER ROAD LOT #23		5.3 STREET	ADORESS	デスペランキャック	1 at 12		
CITY-ST-ZIP	LAKELAND FL 33810		5.4 CITY-S		イングをひころしてい	22 dix		
TITLE	CHECKIN I E 300 IV	DELETE	6.1 TITLE		- Same and L	Change	Addition	
!		Lad Wice it	6.2 NAME	$-\mid \mathcal{D}$	bentley Vir			
NAME			-	Ì	THOS TO LONG	1 1 24 13	\ \ \	
STREET ADDRESS			6.3 STREET	ADDRESS	IN TANK DITHER THE	となりに		
CITY-ST-ZIP			6.4 CITY-S		Lyneland, FI	133X10		
14. Hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes I further certify that the information in the state of the first personal control and the state of the state								
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.								