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**

Principal Place of Business Malling Address					
				- 1	
9 Principal C	lace of Business	2a. Mailing Address		59-345 6048 Not Applicable	
21			6. Certificate of Status Desired		
Suite, Apt. #, etc. Suite, Apt. #, etc. 27			B. Election Campaign Financing Trust Fund Contribution Added to Fees		
City & State City & State		·	7. Is this nonprofit corporation a homeowners association?		
Zip	Country	Zip	Country	8. This corporation owes or has paid the current year intangible	
24	26	29	30	Personal Property Tax due June 30. Yes X No	
	9. Name and Address of Curren	t Registered Agent	81 Name	10. Name and Address of New Registered Agent	
11. Pursuant office or ragent. I a	HILL FL 34610	2 and 617.1508, Florida Stat of Florida. Such change wat tions of, Section 617.0503, I	83 84 City	dress (P.O. Box Number is Not Acceptable) FL 2ip Code reporation submits this statement for the purpose of changing its registered ation's board of directors. I hereby accept the appointment as registered	
SIGNATURE .	Signature, typed or printed name of registered ager	nt and title it applicable. (N	OTE: Registered Agent signature requ	ulred when reinstaling) DATE	
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PO	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition	
NAME	EVANS, DAVID		1.2 NAME		
STREET ADDRESS CITY-ST-ZIP	8108 TANGLEWOOD LANE TAMPA FL 33615		1.3 STREET ADDRESS 1.4 City-St-Zip		
TITLE	SD SD	DELETE	2.1 T/LE	☐ Change ☐ Addition	
NAME	EVANS, CINDY	_ .	2.2 NAME		
STREET ADDRESS	8106 TANGLEWOOD LANE		2.3 STREET ADDRESS	be at	
CITY-ST-ZIP	TAMPA FL 33615		2.4 CITY-ST-ZIP		
TITLE	VD	DELETE	3.1 TITLE	☐ Change ☐ Addition	
NAME	BRUMLEY, ALLAN		3.2 NAME		
STREET ADORESS CITY-ST-ZIP	12309 US 41 SPRING HILL FL 34610		3.3 STREET ADDRESS		
TITLE	TD	DELETE	3.4. CITY - ST - ZIP 4.1 TITLE	☐ Change ☐ Addition	
NAME	BRUMLEY, JEAN		4. 2 NAME		
STREET ADDRESS	12309 US 41		4.3 STREET ADDRESS		
CITY-ST-ZIP	SPRING HILL FL 34610		4.4 CITY - ST - ZIP		
TITLE		☐ DELETE	5.1 TITLE	Change Addition	
NAME			5.2 NAME		
STREET ADDRESS			5.3 STREET ADDRESS		
CITY-ST-ZIP		E locuete	5.4 CITY - ST - ZIP		
TITLE		☐ DELETE	6.1 TITLE	Change Addition	
NAME OTTOGET ADDRESS			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS	,	

14. Thereby 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 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.

FILED

May 01 1998 8:00am

Secretary of State