

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 23, 1999 8:00 am
Secretary of State

04-23-1999 90225 028 ****61.25

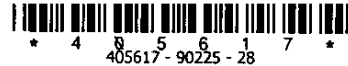
DOCUMENT # N97000005182

1. Corporation Name

DARSEY VILLAGE LANDOWNERS' ASSOCIATION, INCORPORATED

Principal Place of Business
1907 GLORIA DR
TALLAHASSEE FL 32303-3208

Mailing Address
1907 GLORIA DR
TALLAHASSEE FL 32303-3208



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

09/12/1997

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

4. FEI Number

59-3469969

Applied For -

Not Applicable

23 City & State

27 City & State

5. Certificate of Status Desired

☐ \$8.75 Additional Fee Required

24 Zip

25 Country

28 Zip

30 Country

6. Election Campaign Financing Trust Fund Contribution

☐ \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CROMBIE, ROBERTA
1907 GLORIA DR
TALLAHASSEE FL 32303-3208

81 Name

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

83

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE

NAME STARKEY, JESSE
STREET ADDRESS 44 RICHLAND RD
CITY-ST-ZIP CRAWFORDVILLE FL 32327

1.1 TITLE ☐ Change ☐ Addition

TITLE VPD ☐ DELETE

NAME SAPP, LARRY
STREET ADDRESS 720 VIOLET ST
CITY-ST-ZIP TALLAHASSEE FL 32308

2.1 TITLE ☐ Change ☐ Addition

TITLE TD ☐ DELETE

NAME CROMBIE, ROBERTA
STREET ADDRESS 1907 GLORIA DR
CITY-ST-ZIP TALLAHASSEE FL 32303-3208

3.1 TITLE ☐ Change ☐ Addition

TITLE SD ☐ DELETE

NAME STARKEY, ROSE
STREET ADDRESS 44 RICHLAND RD
CITY-ST-ZIP CRAWFORDVILLE FL 32327

4.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

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, with all other like empowered.

SIGNATURE:

ROBERTA CROMBIE

4-20-99

(850) 891-8397

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)