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 # N9700005242 (9)

LAKE ROPER POINTE HOMEOWNERS' ASSOCIATION, INC.

FILED Apr 28 1998 8:00am Secretary of State

LAKE HOPEN POINTE HOMEOWNERS' ASSOCIATION, INC.					
Principal Place	e of Business	Mailing Address		4 194(1)0) 414 1011(100() SAI() 8E() ABIN 6AH()	88161 81618 11811 81818 4181 4881
885 N WYMORE ROAD SUITE 101		665 N WYMORE ROAD SUITE 101		3. Date incorporated or Qualified	
WINTER PARK	FL 32789	WINTER PARK FL 32789		09/15/1997 4. FEI Number	Applied For
					✓ Not Applicable
2. Principal Pi	lace of Business	2a. Mailing Address		5. Certificate of Status Desired	\$8.75 Additional
21 655 N	orth Wymore Road	26 655 North V	Wymore Road	5. Certificate of Status Desired	Fee Required
Suite, Apt.		Suite Apt. #, etc.		Election Campaign Financing	\$5.00 May Be
22 N/A		[27]		Trust Fund Contribution	Added to Fees
City & State	9	City & State		7. Is this nonprofit corporation a homeowned Yes	ers association?
23 Zip	Country	28	Country	This corporation owes or has paid the circumstance of the cir	
24	25	29 30		Personal Property Tax due June 30.	Yes No
	9. Name and Address of Current		1	10. Name and Address of New Registered	Agent
		· · · · · · · · · · · · · · · · · · ·	81 Name		
WILLS, C	CYNTHIA		82 Street Addr	race (P.O. Boy Number is Not Accontable)	
665 N WYMORE ROAD			655	ress (P.O. Box Number is Not Acceptable) North Wymore Road	
SUITE 101			83 N/A		
	PARK FL 32789				85 Zip Code
			1 - 1	FI	L I I I I
11. Pursuant	to the provisions of Sections 617.0502	and 617.1508, Florida Statutes,	the above-named corp	poration submits this statement for the purpose	of changing its registered
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 appointment as registered agent. I am familiar with, and appointment as registered agent. I am familiar with a pulpose of changing its registered age					
SIGNATURE Stoneture, troad or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) PATE Page					
DIGITATIONE.	Signature, typed or printed name of registered agen		tegistered Agent signature requir		
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECTORS IN 12 Change Addition
TITLE	PD OTEOHAN	☐ DELETE	1.1 TITLE		ADI Cusufe (**) Vocition
NAME	WILSON, STEPHAN		1.2 NAME	FF Nouth Williams Bond	
STREET ADDRESS	665 N WYMORE ROAD			55 North Wymore Road	
CITY-ST-ZIP TITLE	WINTER PARK FL 32789 STD	☐ DELETE	1.4 CITY-ST-ZIP 2.1 TITLE		Change Addition
NAME	WILLS, CYNTHIA		22 NAME		
	665 N WYMORE ROAD			55 North Wymore Road	
STREET ADDRESS CITY-ST-ZIP	WINTER PARK FL 32789		2.4 CITY-ST-ZIP		
TITLE	D	DELETE	3.1 TITLE		Change
NAME	SEAL, ROBERT C		3.2 NAME		
STREET ADDRESS	665 N WYMORE ROAD			55 North Wymore Road	
CITY-ST-ZIP	WINTER PARK FL 32789		3.4. CITY-ST-ZIP	-	
TITLE		☐ DELETE	4.1 TITLE		Change Addition
NAME			4.2 NAME		
STREET ADDRESS			4.3 STREET ADDRESS		
CITY-ST-ZIP			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			5.4 CITY - ST - ZIP		Observe Databet
TITLE		☐ DELETE	6.1 TITLE		Change Addition
HAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		1
CITY-ST-ZIP		M. A. I 400	6.4 City-St-ZiP	Section 119 07/3/ii) Florida Statutes further	cortify that the information

4. 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.

SIGNATURE:

27 Wills DINECTOR

4/20/98

CRZE037 (10/97)