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**

N97000006322 (8) DOCUMENT

FLEMINGTON AREA RECREATIONALA GROUP, INC.

Principal Place of Business Mailing Address					
8341 W. HWY. 318 REDDICK FL 32686		8341 W. HWY. 318 REDDICK FL 32686			3. Date Incorporated or Qualified 11/05/1997
					4. FEI Number Applied For
					✓ Not Applicable
2. Principal Place of Business		2a. Mailing Address			5. Certificate of Status Desired \$8.75 Additional
21		26 Cuito Ant # ato	Suite, Apt. #, etc.		Fee Required
Suite, Apt. #, etc.			¬ '		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution
- City & State		City & State -	~City & State -		Is this nonprofit corporation a homeowners association?
23		28			☐ Yes ☑ No
Zip	Country	Zip	Cou	intry	8. This corporation owes or has paid the current year Intangible
24	25	29	30		Personal Property Tax due June 30. Yes No
	9. Name and Address of Curr	ent Registered Agent	 	Od Nome	10. Name and Address of New Registered Agent
				81 Name	
SMITH, GEORGE E				82 Street	eet Address (P.O. Box Number is Not Acceptable)
	HWY. 318			83	
HEDDICE	K FL 32686				
				84 City	y FL 85 Zip Code
11. Pursuant t	to the provisions of Sections 617.0	502 and 617.1508, Florida Statu	ites, the a	bove-named	ned corporation submits this statement for the purpose of changing its registered corporation's board of directors. I hereby accept the appointment as registered
office or re	egistered agent, or both, in the Sta m familiar with, and accept the obl	te of Florida. Such change was ligations of Section 617,0503. F	authorize Iorida Sta	d by the cor tutes.	corporation's board of directors. I hereby accept the appointment as registered
SIGNATURE _	A continuos duras arraitades de continuos continuos de co	ganno oil anni			
SIGNATURE	Signature, typed or printed name of registered	gent and title if applicable. (NC		d Agent signatur	nature required when reinstating) DATE
12.		ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
TITLE	D OMITH GEODGE E	☐ DELETE	1.1 T		, Oliange Addition
NAME	SMITH, GEORGE E 8341 W. HWY. 318		1.2 N	ame Treet address	
STREET ADDRESS	REDDICK FL 32686			ITY-ST-ZIP	133
CITY-ST-ZIP TITLE	D	DELETE	2.1 T	_	Change Addition
NAME	GARMON, FREDDIE	_	2.2 N		
STREET ADDRESS	10021 W. HWY. 318		2.3 \$	TREET ADDRESS	ESS
CITY-ST-ZIP	REDDICK FL 32686		2.40	aty-st-zip	
TITLE	D	☐ DELETE	3.1 T	TLE	Change L Addition
NAME	Brown, Kenneth		3.2 N	AME.	
STREET ADDRESS	5350 NW 3RD ST.		33S	TREET ADDRESS	SSS (
CITY-ST-ZIP	OCALA FL 32681	☐ DELETE	_	STY-ST-ZIP	Change Addition
TITLE	D SHEDDADD MINDDVIN		4.1 T		S onango C yyasiish
NAME	SHEPPARD, MURRVIN 10396 NW 193RD		4.21	iame Treet address	rce
STREET ADDRESS	MICANOPY FL 32667			ITY-ST-ZIP	
CITY-ST-ZIP	D	☐ DELETE	5,1 T		Change Addition
NAME	ROBINSON, JACKI	_	5.2 N		
STREET ADDRESS	8713 NW 181 PLACE		5.3 S	TREET ADDRESS	ess
CITY-ST-ZIP	REDDICK FL 32686		5.4 C	ITY-ST-ZIP	
TITLE	D	☐ DELETE	6.1 T	TLE	Change Addition
NAME	RIGGINS, BETTY		6.2 N	AME	
STREET ADDRESS	P. O. BOX 276		6.3 S	treet address	ESS

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.

SIGNATURE:

FILED

May 04, 1999 8:00 am Secretary of State

05-04-1999 90075 009 ****61.25