

FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

FILED

Mar 31 1997 8:00am
Secretary of StatePROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000027617 (8)

1. Corporation Name

HUNTLEIGH PARK, INC.



Principal Place of Business

Mailing Address

1051 WINDERLEY PL
STE 307
MAITLAND FL 32751
US1051 WINDERLEY PL
STE 307
MAITLAND FL 32751-7296
US

3. Date Incorporated or Qualified

04/14/1993

3a. Date of Last Report

04/16/1996

4. FEI Number

59-3178251

Applied For

Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐ \$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes☒ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 1051 WINDERLEY PL, STE 307

26 1051 WINDERLEY PL, STE 307

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

GILLMORE, ELLSWORTH G.
1051 WINDERLEY PL
STE 307
MAITLAND FL 22751

81 Name

82 GALLIMORE, ELLSWORTH G.

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

84

City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes

SIGNATURE

Signature of the person named as 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	GALLIMORE, ELLSWORTH G	
STREET ADDRESS	1051 WINDERLEY PL STE 307	
CITY-ST-ZIP	MAITLAND FL	
TITLE	VDST	☐ DELETE
NAME	GALLIMORE, SHIRLEY P	
STREET ADDRESS	1051 WINDERLEY PLACE STE 307	
CITY-ST-ZIP	MAITLAND FL	
TITLE	V	☒ DELETE
NAME	GALLIMORE, E. LYNDON	
STREET ADDRESS	1051 WINDERLEY PL STE 307	
CITY-ST-ZIP	MAITLAND FL	
TITLE	V	☐ DELETE
NAME	GILLMORE, COURTNEY B.	
STREET ADDRESS	1051 WINDERLEY PLACE STE 307	
CITY-ST-ZIP	MAITLAND FL	
TITLE	V	☐ DELETE
NAME	WARD, LOUISE A	
STREET ADDRESS	1051 WINDERLEY PLACE STE 307	
CITY-ST-ZIP	MAITLAND FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	VDT ☒ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☒ Change ☐ Addition
4.2 NAME	GALLIMORE, COURTNEY B.
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	VS ☒ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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 607, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE

 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 Louise A. Ward, Vice President

March 26, 1997

(407) 667-0100

Date

Daytime Phone #

CR2E034 (9/96)