

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. McInnis
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P93000076149 (2)

1. Corporation Name

PRINGLE COMMUNITIES, INC.

Principal Place of Business

26600 ACE AVENUE
LEESBURG FL 34748

Mailing Address

26600 ACE AVENUE
LEESBURG FL 34748



2. Principal Place of Business

2a. Mailing Address

21

State, Apt. #, etc.

26

State, 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

SUMMERS, GARY L ESQ.
WILLIAMS, SMITH AND SUMMERS, P.A.
380 WEST ALFRED STREET
TAVARES FL 32778-3298

81 Name

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

83

84 City

FL

85

Zip Code

3. Date Incorporated or Quoted

11/03/1993

3a. Date of Last Report

02/09/1995

4. FEI Number

59-3212431

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

11. Pursuant to the provisions of Sections 607.0602 and 607.1503, 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 607.041, Florida Statutes.

SIGNATURE

Signature of Registered Agent

Signature of New Registered Agent

Date

12. OFFICERS AND DIRECTORS

12.1

TITLE

DP
PRINGLE, JOHN A
26600 ACE AVE.
LEESBURG FL 34748

☐ DELETE

NAME

STREET ADDRESS

CITY, STATE, ZIP

TITLE

NAME

STREET ADDRESS

CITY, STATE, ZIP

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CITY, STATE, ZIP

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13.

13.1 TITLE

13.2 NAME

13.3 STREET ADDRESS

13.4 CITY, STATE, ZIP

13.5 TITLE

13.6 NAME

13.7 STREET ADDRESS

13.8 CITY, STATE, ZIP

13.9 TITLE

13.10 NAME

13.11 STREET ADDRESS

13.12 CITY, STATE, ZIP

13.13 TITLE

13.14 NAME

13.15 STREET ADDRESS

13.16 CITY, STATE, ZIP

13.17 TITLE

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13.20 CITY, STATE, ZIP

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13.23 STREET ADDRESS

13.24 CITY, STATE, ZIP

13.25 TITLE

13.26 NAME

13.27 STREET ADDRESS

13.28 CITY, STATE, ZIP

13.29 TITLE

13.30 NAME

13.31 STREET ADDRESS

13.32 CITY, STATE, ZIP

13.33 TITLE

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change

☐ Addition

☐ Change

☐ Addition

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☐ Addition

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SIGNATURE:

John A. Pringle

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/21/96

904-365-2303

Date

Signature

CR2E034 (12/95)