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FILED
Feb 11 1998 8:00am
Secretary of State

PROFIT CORPORATION ANNUAL REPORT 1998	 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **P95000004091 (1)**

1. Corporation Name

THE PRESERVE AT LAKE THOMAS, INC.

Principal Place of Business

**212305 AARON COURT
LUTZ FL 33549**

Mailing Address

**212305 AARON COURT
LUTZ FL 33549**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/17/1995

4. FEI Number

59-3289918

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 owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

21 5326 Land O'Lakes Blvd

Suite, Apt. #, etc.

22

City & State

23 Land O'Lakes, FL

Zip

24 34639

Country

25 USA

2a. Mailing Address

26 P. O. Box 979

Suite, Apt. #, etc.

27

City & State

28 Land O'Lakes, FL

Zip

29 34639-0979

Country

30 USA

9. Name and Address of Current Registered Agent

**TROCKE, MICHAEL T
101 E. KENNEDY BLVD.
SUITE 2800
TAMPA FL 33602**

10. Name and Address of New Registered Agent

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **VD** ☐ DELETE

NAME **PNINSON, ROBERT H**
STREET ADDRESS **212305 AARON COURT**
CITY-ST-ZIP **LUTZ FL 33549**

TITLE **PSTD** ☐ DELETE

NAME **COPENHAVER, ROGER D**
STREET ADDRESS **18754 WIMBLEDON CIRCLE**
CITY-ST-ZIP **LUTZ FL 33549**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

PSTD
Copenhaver, Roger D.
1713 Lake Heron Drive
Lutz, FL 33549-9041

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

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ 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 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

Roger D. Copenhaver 2-4-98

(813-996-7754)

CP2E034 (10/97)