

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

FILED
Jul 02 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 # P97000029889 (7)

1. Corporation Name

NORTHGLEN 10239, INC.



Principal Place of Business

10239 NORTHGLEN DRIVE
CLERMONT FL 34711

Mailing Address

10239 NORTHGLEN DRIVE
CLERMONT FL 34711

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/31/1997	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number 59-3464468	Applied For Not Applicable
22	City & State	27	City & State	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
23	Zip	28	Zip	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
24	Country	29	Country	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30 <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent

PETERSON, BRADLEY C
10239 NORTHGLEN DRIVE
CLERMONT FL 34711

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	P, P
NAME	PETERSON, BRADLEY C	1.2 NAME	Peterson, Bradley C.
STREET ADDRESS	10239 NORTHGLEN DRIVE	1.3 STREET ADDRESS	10239 Northglen Dr
CITY-ST-ZIP	CLERMONT FL 34711	1.4 CITY-ST-ZIP	Clermont, FL 34711
TITLE		2.1 TITLE	V, S
NAME	COOK, GREGORY K.	2.2 NAME	COOK, GREGORY K.
STREET ADDRESS	34 B. Crest	2.3 STREET ADDRESS	34 B. Crest
CITY-ST-ZIP	Winter Garden, FL	2.4 CITY-ST-ZIP	Winter Garden, FL 34787
TITLE		3.1 TITLE	M
NAME		3.2 NAME	Peterson, Richard A.
STREET ADDRESS		3.3 STREET ADDRESS	10239 Northglen Dr
CITY-ST-ZIP		3.4 CITY-ST-ZIP	Clermont, FL 34711
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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: 

CR2E034 (10/97)