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

PROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P9700036332 (9)

HAWTHORN PARK IV BY NEAL COMMUNITIES, INC.

FILED Jan 27 1998 8:00am Secretary of State

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Principal Place of Business Mailing Address										1 19041001 110 10141 100H 00111 00111 0	IANA dalahi arang 1			
3711 CORTEZ ROAD WEST 3711 CORTEZ ROAD WES						ST	ſ							
BRADENTON FL \$4210 BRADENTON FL 34210										DO NOT WRITE	E INI THIC CO	PACE		
									3.	DO NOT WRITE IN THIS SPACE 3. Date Incorporated or Qualified				
									"	04/21/1997				
	Principal F	Place of Busin	ness	2a. Mailir	2a. Mailing Address				1	FEI Number		A	pplied For	
21				26					€	55-0747347		N	lot Applicable	
_	Suite, Apt.	#, etc.		<u> </u>	Suite, Apt. #, etc.				Б.	Certificate of Status Desired			Additional	
22	City & State			27 City 8	City & State			-+-	Flooring Commercial Figure 2			tequired		
23	J., 4 J.				28				Election Campaign Financing Trust Fund Contribution			May Be		
	Zip						Country			This corporation owes or has po				
24	25			29					Personal Property Tax due June 30. Yes No					
<u> </u>		9, Name	and Address of C	urrent Registered	Agent				10. Name and Address of New Registered Agent					
BARTLEY, JOHN M							1	Name					ĺ	
3711 CORTEZ ROAD WEST						8	82 Street Addre			O. Box Number is Not Accepta	ble)			
	BR	ADENTON (FL 34210											
						8	٦							
						8	4	City			FL	85 Zip	Code	
11	. Pursuant	to the provisi	ions of Sections 60	7.0502 and 607.150	8. Florida Statut	es, the abo	ve-	named co	orporation	submits this statement for the	ourrose of c	hanging	its registered	
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 region 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 regist agent. I am familiar with, and accept the obligations of, Section 607.0505, Florida Statutes.													registered	
e i	_	**** (4)	in, and accept the	obligations of Secti	O/1 007.0303, 1 k	onda otaldi	σ δ.							
SIGNATURE Signature, typed or printed name of registered agent and titin if applicable (NOTE Re								l signalure rec	quired when r	einstaling)	DATE			
12			OFFICER	S AND DIRECTORS		13.				DDITIONS/CHANGES TO OFFI				
TITLE		☐ DELETE			•	1.1 TITLE		PTD	_	L	_] Change	XX Addition		
NAME OFFICE ADDRESS								Schier, Jimes R.						
STREET ADDRESS							1.3 STREET ADDRESS		3711 Cort∋z Road WEst, Suite 300 Bradenton, FL 34210					
CITY-ST-ZIP TITLE			DELETE				1.4 CITY-ST-ZIP 2.1 TITLE		PASD	ton, FL 34210		Change	Addition	
NAME								4 1		v John M		_ Criange	XX Addition	
STREET ADDRESS						2.2 NAMI 2.3 STRE		DDBESS 3	Bartley, John M. 3711 Cortaz Road West, Suite 300					
CITY-ST-ZIP						2.4 CITY		- ZIP B	raden	ton, FL 34210	Burce	300		
TITLE					DELETE	3 1 TATLE		s	_			Change	Addition	
NAME						3.2 NAM8	:	О	lson,	Ann M.				
STREET ADDRESS						3.3 STREE	ET AC	DDRESS 3	711 C	ortez Road West,	Suite	300		
	Y-ST-ZIP					3.4. CITY				ton, FL 34210		_		
TITL					☐ DELETE	4.1 TITLE					L	_ Change	Addition	
NAA	1					4. 2 NAM								
	EET ADORESS					4.3 STREE		1						
TITE	r-ST-ZIP				DELETE	4.4 CITY - 5.1 TITLE		ZIP				Change	Addition	
NAM					gapt weekth	5.2 NAME					<u>L.</u>	,, onango		
	EET ADDRESS					5.3 STHE		DDRESS						
	(-\$1-Z#P					5.4 CITY-								
TITL					DELETE	6.1 TiTLE						Change	Addition	
NAM	AE					6.2 NAME								
STA	EET ADDRESS					6.3 STREE	TAD	DDRESS						
	-ST-ZIP					6.4 CITY-								
14.	. I hereby c	ertify that the	e information suppli	ed with this filing do	es not qualify to	or the exem	ntio	n stated i	n Section	119.07(3)(i). Florida Statutes, I.	further certif	v that the	information	

4. 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 recover 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.

OLONIATURE.

Ern M. alson

ANN M. OLSON 1/2, 198

941.766.0697

CR2E034 (10/