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Mar 31, 1999 8:00 am
Secretary of State

03-31-1999 90060 003 ***150.00

PROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # P98000028245

1. Corporation Name

ECHELON AT WOODLAND PARK, INC.

Principal Place of Business

**ONE PROGRESS PLAZA
STE 1500
ST PETERSBURG FL 33701**

Mailing Address

**ONE PROGRESS PLAZA
STE 1500
ST PETERSBURG FL 33701**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/24/1998

4. FEI Number

59-3500511

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 the current year Intangible
Personal Property Tax. ☐ Yes ☒ No

2. Principal Place of Business

21 450 Carillon Parkway

2a. Mailing Address

26 450 Carillon Parkway

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 200

27 Suite 200

City & State

23 St. Petersburg

City & State

28 St. Petersburg

Zip

24 33716

Country

25 USA

Zip

29 33716

Country

30 USA

9. Name and Address of Current Registered Agent

**GLATTHORN JOHNSON, SUSAN
ONE PROGRESS PLAZA
STE 1500
ST PETERSBURG FL 33701**

10. Name and Address of New Registered Agent

81 Name

Susan G. Johnson

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

450 Carillon Parkway, Suite 200

83

84 City

St. Petersburg

FL

85 Zip Code
33716

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

Susan G. Johnson

3/24/99

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 **PD** ☐ DELETE
NAME **HIGGINS, RAYMOND F**
STREET ADDRESS **ONE PROGRESS PLAZA, STE 1500**
CITY-ST-ZIP **ST PETERSBURG FL 33701**

TITLE **VSD** ☐ DELETE
NAME **GLATTHORN JOHNSON, SUSAN F**
STREET ADDRESS **ONE PROGRESS PLAZA, STE 1500**
CITY-ST-ZIP **ST PETERSBURG FL 33701**

TITLE **VTD** ☐ DELETE
NAME **HOBBS, JAMES R JR**
STREET ADDRESS **ONE PROGRESS PLAZA, STE 1500**
CITY-ST-ZIP **ST PETERSBURG FL 33701**

TITLE **S** ☒ DELETE
NAME **CRISP, AMY L**
STREET ADDRESS **ONE PROGRESS PLAZA, STE 1500**
CITY-ST-ZIP **ST PETERSBURG FL 33701**

TITLE **S** ☒ DELETE
NAME **MCDONALD, SHERRY L**
STREET ADDRESS **ONE PROGRESS PLAZA, STE 1500**
CITY-ST-ZIP **ST PETERSBURG FL 33701**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13.

ADDITIONAL CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

D/P

☐ Change

☐ Addition

1.2 NAME

Raymond F. Higgins

1.3 STREET ADDRESS

450 Carillon Parkway, Suite 200

1.4 CITY-ST-ZIP

St. Petersburg, FL 33716

2.1 TITLE

D/V/S

☒ Change

☐ Addition

2.2 NAME

Susan G. Johnson

2.3 STREET ADDRESS

450 Carillon Parkway, Suite 200

2.4 CITY-ST-ZIP

St. Petersburg, FL 33716

3.1 TITLE

D/V/T

☐ Change

☐ Addition

3.2 NAME

James R. Hobbs, Jr.

3.3 STREET ADDRESS

450 Carillon Parkway, Suite 200

3.4 CITY-ST-ZIP

St. Petersburg, FL 33716

4.1 TITLE

☐ Change

☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E034 (1/98)