

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **705640** (1)

1. Corporation Name

SEA RANCH LAKES BEACH CLUB, INC.



Principal Place of Business

Mailing Address

**1 GATEHOUSE ROAD
SEA RANCH LAKES FL 33308**

**1 GATEHOUSE ROAD
SEA RANCH LAKES FL 33308**

3. Date Incorporated or Qualified

05/21/1963

3a. Date of Last Report

02/14/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

59-0880463

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**PATON STARR
#1 GATEHOUSE ROAD
SEA RANCH LAKES FL 33308**

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 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Starr Paton

Starr Paton

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

(NOTE: Registered Agent signature required when re-stating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE
NAME **D**
STREET ADDRESS **LEE, JAMES P.**
CITY - ST - ZIP **4 MINNETONKA ROAD
SEA RANCH LKS FL**

TITLE ☐ DELETE
NAME **D**
STREET ADDRESS **BARRASSO, JEAN**
CITY - ST - ZIP **1 SENECA ROAD
SEA RANCH LAKES FL**

TITLE ☐ DELETE
NAME **D**
STREET ADDRESS **WINSTON, ANN**
CITY - ST - ZIP **8 MENDOTA LANE
SEA RANCH LKS FL**

TITLE ☐ DELETE
NAME **P**
STREET ADDRESS **CHIAPPETTA, LAWRENCE**
CITY - ST - ZIP **20 WINNEBAGO ROAD
SEA RANCH LKS FL**

TITLE ☐ DELETE
NAME **ST**
STREET ADDRESS **LIMPERIS, NICHOLAS**
CITY - ST - ZIP **9 SARANAC ROAD
SEA RANCH LAKES FL**

TITLE ☐ DELETE
NAME **VP**
STREET ADDRESS **O'NEILL, MARY**
CITY - ST - ZIP **12 WINNEBAGO RD
SEA RANCH LKS FL**

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

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

ST

V.P.

president

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Mary K O'Neill

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)