

**FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00**

APPROVED AND FILED

95 MAR -1 PM 2:50

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT 1995  
  
 FLORIDA DEPARTMENT OF STATE  
 Sandra B. Northam  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # 714779 (6)  
 1. Corporation Name  
 FISHERMAN'S COVE ASSOCIATION, INC.

Principal Place of Business Mailing Address  
 9000 BLIND PASS ROAD SARASOTA FL 34242  
 9000 BLIND PASS ROAD SARASOTA FL 34242

2. Principal Place of Business 2a. Mailing Address  
 21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
 22 City & State 27 City & State  
 23 Zip Country 28 Zip Country  
 24 25 29 30

DO NOT WRITE IN THIS SPACE  
 3. Date Incorporated or Qualified 3a. Date of Last Report  
 06/17/1968 02/09/1994  
 4. FEI Number Applied For  
 59-1232713 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  
 7. Nonprofit with IRS 501(c)(3) Tax Exempt Status  \$68.75 Supplemental Fee Not Required  
 8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent  
 LOBECK, DAN ESQ.  
 2063 MAIN STREET  
 SUITE 101  
 SARASOTA FL 34237

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 reappointing) DATE

12. OFFICERS AND DIRECTORS	
TITLE	P
NAME	BELL, NORMAN
STREET ADDRESS	900 LN 301 NA
CITY - ST - ZIP	FREMONT IN
TITLE	D
NAME	KATHARINE BUTTON
STREET ADDRESS	PO BOX 40125 NA
CITY - ST - ZIP	SARASOTA FL
TITLE	SD
NAME	BUTLER, VIOLET
STREET ADDRESS	PO BOX 2280 NA
CITY - ST - ZIP	W LAFAYETTE IN
TITLE	T
NAME	PINK, FRANK
STREET ADDRESS	496 ZORN LANE
CITY - ST - ZIP	MAYFIELD VILLAGE OH
TITLE	V
NAME	WILSON, GUY
STREET ADDRESS	109 NO 5 STR
CITY - ST - ZIP	BARDSTOWN KY
TITLE	D
NAME	BROWN, NANCY
STREET ADDRESS	5005 WOODMARK COURT
CITY - ST - ZIP	FT. WAYNE IN

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	WILSON, GUS
1.3 STREET ADDRESS	109 NORTH 5TH ST.
1.4 CITY - ST - ZIP	Bardstown, Ky. 40004 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.1 TITLE	VPD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	BELL, NORMAN
2.3 STREET ADDRESS	900 ln 301
2.4 CITY - ST - ZIP	Fremont, In. 46737 <input type="checkbox"/> Change <input type="checkbox"/> Addition
3.1 TITLE	SD <input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	BUTLER, VIOLET
3.3 STREET ADDRESS	P.O. BOX 2280
3.4 CITY - ST - ZIP	W. LAFAYETTE, IN. 47906 <input type="checkbox"/> Change <input type="checkbox"/> Addition
4.1 TITLE	T <input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	PINK, FRANK
4.3 STREET ADDRESS	496 ZORN LANE
4.4 CITY - ST - ZIP	MAYFIELD VILLAGE, OH. 44143 <input type="checkbox"/> Change <input type="checkbox"/> Addition
5.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	GRUBB, JOHN
5.3 STREET ADDRESS	326 VALERA COURT
5.4 CITY - ST - ZIP	WINTER PARK, FL. 32789 <input type="checkbox"/> Change <input type="checkbox"/> Addition
6.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	BOLAND, WILLIAM
6.3 STREET ADDRESS	23559 STONYBROOK DR.
6.4 CITY - ST - ZIP	N. OLMSTEAD, OH. 44070 <input type="checkbox"/> Change <input type="checkbox"/> Addition

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 110.07(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:  2-22-95 813-349-1400  
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Telephone



1995 BOARD OF DIRECTORS

DIRECTOR PRESIDENT: GUS WILSON 8900 BLIND PASS ROAD  
109 NORTH 5TH. ST. A - 112  
BARDSTOWN, KY. 40004 (813) 349-4112  
(502) 348-3342

DIRECTOR VICE PRES: NORMAN BELL 8900 BLIND PASS ROAD  
900 LN 301 A - 213  
LAKE GEORGE (813) 349-1286  
FREMONT, IN. 46737  
(219) 833-1190

DIRECTOR SECRETARY: VIOLET BUTLER 9000 BLIND PASS ROAD  
P.O. BOX 2280 B - 103  
W. LAFAYETTE, IN. 47906 (813) 349-9353  
(317) 463-7330

DIRECTOR: JOHN GRUBB 8900 BLIND PASS ROAD  
326 VALERA COURT A - 211  
WINTER PARK, FL. 32789 (813) 349-4518  
(407) 647-5384

DIRECTOR: WM. (MIKE) BOLAND 9000 BLIND PASS ROAD  
23559 STONYBROOK DR. B - 112  
N. OLMSTEAD, OH. 44070 (813) 349-3634  
(216) 734-0574

DIRECTOR: MARK JOHNSON 8900 BLIND PASS ROAD  
2805 AMBLESIDE PL. A - 114  
CINCINNATI, OHIO 45208 (813) 349-2308  
WK-(513) 621-2875  
HM-(513) 871-2575

DIRECTOR: LYNN BYERS 9000 BLIND PASS ROAD  
9000 BLIND PASS ROAD B310 B - 310  
SARASOTA, FL. 34242 (813) 346-1357  
(813) 346-1357

DIRECTOR: FRANCES A. SCHROEDER 8900 BLIND PASS ROAD  
8900 BLIND PASS ROAD A209 A - 209  
SARASOTA, FL. 34242 (813) 349-0581  
(813) 349-0581

DIRECTOR: KAREN BLOCK 8900 BLIND PASS ROAD  
1321 MEADOW LANE A - 308  
DEERFIELD, IL. 60015 (813) 349-2245  
(708) 945-4043

NOTE:  
\* TREASURER: FRANK PINK 9000 BLIND PASS ROAD  
496 ZORN LANE B - 104  
MAYFIELD VILLAGE, OH. 44143 (813) 349-0796  
(216) 449-5363