

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 # **720215 (3)**
1. Corporation Name
PINE ACRES CIVIC ASSOC., INC.



Principal Place of Business: **C/O DALE WEBSTER 6525 JACK STREET PUNTA GORDA FL 33982**
Mailing Address: **C/O DALE WEBSTER 6525 JACK STREET PUNTA GORDA FL 33982**

3. Date Incorporated or Qualified: **02/08/1971**
3a. Date of Last Report: **03/16/1995**

21. Principal Place of Business: **PINE ACRES CIVIC ASSOC INC**
22. Suite, Apt. #, etc.: **INC**
23. City & State: **PUNTA GORDA FL**
24. Zip: **33982**
25. County: **CHARLOTTE**
26. Mailing Address: **6649 BERNADEAN BLVD.**
27. Suite, Apt. #, etc.:
28. City & State: **PUNTA GORDA FL**
29. Zip: **33982**
30. County: **CHARLOTTE**
4. FEI Number: **59-2341403**
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: **WEBSTER, DALE 6525 JACK ST PUNTA GORDA FL 33982**
10. Name and Address of New Registered Agent:
81. Name: **LANKERD, JACK**
82. Street Address (P.O. Box Number is Not Acceptable): **6564 JACK ST**
83. City: **PUNTA GORDA**
84. City: **FL**
85. Zip Code: **33982**

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: **LANKERD, JACK CH. B. O. D. x Jack Lankerd** DATE: **MARCH 7, 1996**

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|---|---|--|
| TITLE: P | HARRIS, GERTRUDE 6601 BERNADEAN BLVD PUNTA GORDA, FL 00000 | 1.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE: VP | SCHRICK, EMMET 6736 BERNADEAN BLVD PUNTA GORDA FL | 2.1 TITLE: <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition | VP WEBER, ROBERT 6618 JACK ST PUNTA GORDA, FL 33982 |
| TITLE: D | JOYNER, THERESE 1801 BETTY LOU CT PUNTA GORDA FL | 3.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE: D | DANISON, DAN 6514 JACK ST PUNTA GORDA, FL 00000 | 4.1 TITLE: <input type="checkbox"/> Change <input type="checkbox"/> Addition | |
| TITLE: D | WEBER, ROBERT 6618 JACK ST PUNTA GORDA, FL 00000 | 5.1 TITLE: <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition | D HAYNES, BILL 6510 JACK ST PUNTA GORDA, FL 33982 |
| TITLE: D | KAZMARK, RAY 1800 KEITH DRIVE PUNTA GORDA, FL 00000 | 6.1 TITLE: <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition | D LANKERD, JACK 6564 JACK ST PUNTA GORDA, FL 33982 |

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: **LANKERD JACK x Jack Lankerd** DATE: **3/7/96** DAYTIME PHONE #: **639-1469**

CR2E037 (12/95)