

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR -9 AM 9:21

DOCUMENT # 720678 (2)

1. Corporation Name
NEW COLONY HOUSE, INC.

Principal Place of Business Mailing Address
500 S BEACH ST 500 S BEACH ST
OFFICE OFFICE
DAYTONA BEACH FL 32114-5037 DAYTONA BEACH FL 32114-5037

DO NOT WRITE IN THIS SPACE

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

3. Date Incorporated or Qualified 3a. Date of Last Report
04/08/1971 04/05/1994
4. FEI Number Applied For
59-1365166 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
FISCHER, KATHLEEN T
500 S. BEACH ST.
B2
DAYTONA BCH FL 32014

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 officer 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 _____ DATE _____
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)

12. OFFICERS AND DIRECTORS
TITLE PD
NAME FISCHER, KATHLEEN
STREET ADDRESS 500 S BEACH ST B2
CITY - ST - ZIP DAYTONA BEACH, FL 00000
TITLE D
NAME COMEFREY, DOROTHY
STREET ADDRESS 500 S BEACH ST #C1
CITY - ST - ZIP DAYTONA BEACH, FL 00000
TITLE D
NAME LILLIAN, BOMELEY
STREET ADDRESS 500 S BEACH ST #J-2
CITY - ST - ZIP DAYTONA BEACH, FL 00000
TITLE D
NAME INDELICATO, ANDY
STREET ADDRESS 500 S BEACH ST #K1
CITY - ST - ZIP DAYTONA BEACH, FL 00000
TITLE D
NAME LOWE, JOHN
STREET ADDRESS 500 S BEACH ST #K3
CITY - ST - ZIP DAYTONA BCH, FL 00000

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 VICE PRESIDENT Change Addition
2.2 NAME Bobbi ABOOD
2.3 STREET ADDRESS 500 S. Beach St.
2.4 CITY - ST - ZIP DAY. Beach, FL
3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP
4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP
5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP
6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

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)(b), 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Kathleen Fischer 3/6/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR