

FILE NOW: FILING FEE IS \$61.25

FILED
Apr 08 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
--	---	---

DOCUMENT # **722816** (6)
1. Corporation Name

BIG TREE SHORES OWNERS' ASSOCIATION, INC.



Principal Place of Business 2025 HICKORYWOOD DRIVE DAYTONA BEACH FL. 32119-8802	Mailing Address 2025 HICKORYWOOD DRIVE DAYTONA BEACH FL. 32119-8802
---	---

2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified 03/02/1972		3a. Date of Last Report 04/08/1996	
21. Suite, Apt. #, etc.	26. Suite, Apt. #, etc.	4. FEI Number 59-2350226		Applied For ☒ Not Applicable			
22. City & State	27. City & State	5. Certificate of Status Desired ☒		\$8.75 Additional Fee Required			
23. Zip	28. Zip	6. Election Campaign Financing Trust Fund Contribution ☐		\$5.00 May Be Added to Fees			
24. Country	29. Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No					

9. Name and Address of Current Registered Agent LEE, ANNA #1 APPLEWOOD CIR. SOUTH DAYTONA FL 32119		10. Name and Address of New Registered Agent	
81. Name Murphy, Harold		82. Street Address (P.O. Box Number is Not Acceptable) 5 Applewood Circle	
83. City South Daytona		84. Zip Code FL 32119	

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 *Harold J. Murphy* DATE **APRIL 2, 1997**
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	PD
NAME	LEE, ANNA	1.2 NAME	Murphy, Harold
STREET ADDRESS	1 APPLEWOOD	1.3 STREET ADDRESS	5 Applewood Circle
CITY-ST-ZIP	SOUTH DAYTONA FL	1.4 CITY-ST-ZIP	South Daytona FL 32119
TITLE	TS	2.1 TITLE	TS
NAME	MERRILL, CANDANCE	2.2 NAME	Cunningham, Victoria
STREET ADDRESS	2023 HICKORY WOOD DR	2.3 STREET ADDRESS	2043 Hickorywood Drive
CITY-ST-ZIP	S DAYTONA, FL FL 32119	2.4 CITY-ST-ZIP	South Daytona, FL 32119
TITLE	VP	3.1 TITLE	VP
NAME	MURPHY, HAROLD	3.2 NAME	Hale, Irene
STREET ADDRESS	5 APPLEWOOD CIR	3.3 STREET ADDRESS	17 Applewood Circle
CITY-ST-ZIP	S DAYTONA FL	3.4 CITY-ST-ZIP	So. Daytona, FL 32119
TITLE	S	4.1 TITLE	S
NAME	SPERLICH, MARIE	4.2 NAME	Straden, Phyllis
STREET ADDRESS	8 CHERRYWOOD CIR	4.3 STREET ADDRESS	27 Applewood Circle
CITY-ST-ZIP	S DAYTONA FL	4.4 CITY-ST-ZIP	South Daytona, FL 32119
TITLE	D	5.1 TITLE	D
NAME	SPERLICH, MARIE	5.2 NAME	Dematteo, Rita
STREET ADDRESS	8 CHERRYWOOD DR.	5.3 STREET ADDRESS	17 Applewood Circle
CITY-ST-ZIP	S DAYTONA, FL 00000	5.4 CITY-ST-ZIP	So. Daytona, FL 32119
TITLE	D	6.1 TITLE	D
NAME	WHITE, HELEN	6.2 NAME	Gladys Kuhmley
STREET ADDRESS	2044 HICKORYWOOD	6.3 STREET ADDRESS	2034 Hickorywood Drive
CITY-ST-ZIP	S. DAYTONA FL	6.4 CITY-ST-ZIP	So. Daytona, FL 32119

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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.

CR2E037 (9/96)