

# 2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

**FILED**  
**Feb 07, 2006 8:00 am**  
**Secretary of State**

02-07-2006 90030 046 \*\*\*\*61.25

**DOCUMENT # 730425**

1. Entity Name

TIDEVUE ESTATES CIVIC ASSOCIATION, INC.



Principal Place of Business

4214 11TH STREET COURT EAST  
ELLENTON FL 34222  
US

Mailing Address

4214 11TH ST CT E  
ELLENTON FL 34222



2. Principal Place of Business

Suite, Apt. #, etc.

3. Mailing Address

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

1st MOORE

CR2E037 (10/05)

4. FEI Number

59-1656049

Applied For

Not Applicable

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

6. Name and Address of Current Registered Agent

BINGHAM, BILLIE  
4212 13TH STREET E  
ELLENTON FL 34222

7. Name and Address of New Registered Agent

Name

YOERGER, ROY E

Street Address (P.O. Box Number is Not Acceptable)

1520 44th Avenue Drive E.

City

Ellenton

FL

Zip Code

34222

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reappointing)

DATE

**FILE NOW: FEE IS \$61.25**  
**Due By May 1, 2006**

9. Election Campaign Financing  
Trust Fund Contribution. ☐

**\$5.00** May Be  
Added to Fees

**Make Check Payable to**  
**Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE	D	<input checked="" type="checkbox"/> Delete
NAME	SMITH, FRANK	
STREET ADDRESS	4416 14TH STREET E	
CITY-ST-ZIP	ELLENTON FL 34222	
TITLE	D	<input type="checkbox"/> Delete
NAME	ALPHENAAR, JOHN	
STREET ADDRESS	1520 46TH AVE DR E	
CITY-ST-ZIP	ELLENTON FL 34222	
TITLE	P	<input checked="" type="checkbox"/> Delete
NAME	BINGHAM, BILLIE	
STREET ADDRESS	4212 13 ST. E	
CITY-ST-ZIP	ELLENTON FL 34222	
TITLE	V	<input type="checkbox"/> Delete
NAME	WILLIAMS, LYLE	
STREET ADDRESS	3811 14TH STREET E	
CITY-ST-ZIP	ELLENTON FL 34222	
TITLE	S	<input type="checkbox"/> Delete
NAME	SCHMITT, JOYCE	
STREET ADDRESS	1512 44TH AVE DR E	
CITY-ST-ZIP	ELLENTON FL 34222	
TITLE	T	<input type="checkbox"/> Delete
NAME	BRACEY, CHARLES	
STREET ADDRESS	4415 15TH ST E	
CITY-ST-ZIP	ELLENTON FL 34222	

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE	P	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Yoerger, Roy E.	
STREET ADDRESS	1520 44th Avenue Drive E.	
CITY-ST-ZIP	Ellenton, FL 34222	
TITLE	S	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Giles, Janice	
STREET ADDRESS	1516 45th Avenue E.	
CITY-ST-ZIP	Ellenton, FL 34222	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Lindsay, Tom	
STREET ADDRESS	1404 41st Avenue E.	
CITY-ST-ZIP	Ellenton, FL 34222	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Davis, Ed	
STREET ADDRESS	4218 11th Street E.	
CITY-ST-ZIP	Ellenton, FL 34222	
TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	Schmitt, Joyce	
STREET ADDRESS	1512 44th Avenue Drive E.	
CITY-ST-ZIP	Ellenton, FL 34222	
TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	Hubbard, Robert	
STREET ADDRESS	1408 44th Avenue E.	
CITY-ST-ZIP	Ellenton, FL 34222	

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

*Roy E. Yoerger*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Roy E. Yoerger

1-25-06

941-722-2557