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

APPROVED AND FILED

95 MAR -2 PM 3:45

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 734979 (8)

1. Corporation Name

BAYSHORE VILLAS ASSOCIATION OF OKALOOSA COUNTY, INC.

Principal Place of Business	Mailing Address
1005 EVERGLADE DRIVE P.O. BOX 161 NICEVILLE FL 32588-7161	1005 EVERGLADE DRIVE P.O. BOX 161 NICEVILLE FL 32588-7161

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/17/1976
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-2400821 ☐ Applied For ☐ Not Applicable

2a. Principal Place of Business	2a. Mailing Address
21 1017 Everglade Drive	26 1017 Everglade Drive
Suite, Apt. #, etc. 22 P.O. Box 161	Suite, Apt. #, etc. 27 P.O. Box 161
City & State 23 Niceville FL	City & State 28 Niceville FL
Zip / Country 24 32588-7161 / 25	Zip / Country 29 32588-7161 / 30

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

MAZZA, KIMBERLY
*1005 EVERGLADE DRIVE
NICEVILLE FL 32578

10. Name and Address of New Registered Agent

81 Name: Nancy J. Woodruff
82 Street Address (P.O. Box Number is Not Acceptable): 920 Linden Ave.
83
84 City: Niceville FL 85 Zip Code: 32578

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: Nancy J Woodruff Nancy J. Woodruff 2-16-95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	T	1.1 TITLE	T/D	☒ Change ☐ Addition
NAME	MAZZA, KIMBERLY A	1.2 NAME	WOODRUFF NANCY J	
STREET ADDRESS	1005 EVERGLDE DRIVE	1.3 STREET ADDRESS	920 LINDEN AVE.	
CITY-ST-ZIP	NICEVILLE FL 32578-3514	1.4 CITY-ST-ZIP	NICEVILLE FL 32578	
TITLE	P	2.1 TITLE	P/D	☒ Change ☐ Addition
NAME	BOUDREAU, ROLAND J	2.2 NAME	MURPHY MARY	
STREET ADDRESS	1408 CAPE LANE	2.3 STREET ADDRESS	1031 EVERGLADE	
CITY-ST-ZIP	NICEVILLE FL 32578-3514	2.4 CITY-ST-ZIP	NICEVILLE FL 32578	
TITLE	VP	3.1 TITLE	VP/D	☒ Change ☐ Addition
NAME	MURPHY, MARY	3.2 NAME	BOMGARDNER RICK	
STREET ADDRESS	1031 EVERGLADE DRIVE	3.3 STREET ADDRESS	1013 EVERGLADE	
CITY-ST-ZIP	NICEVILLE FL 32578-3514	3.4 CITY-ST-ZIP	NICEVILLE FL 32578	
TITLE		4.1 TITLE		☐ Change ☐ Addition
NAME		4.2 NAME		
STREET ADDRESS		4.3 STREET ADDRESS		
CITY-ST-ZIP		4.4 CITY-ST-ZIP		
TITLE		5.1 TITLE		☐ Change ☐ Addition
NAME		5.2 NAME		
STREET ADDRESS		5.3 STREET ADDRESS		
CITY-ST-ZIP		5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE		☐ Change ☐ Addition
NAME		6.2 NAME		
STREET ADDRESS		6.3 STREET ADDRESS		
CITY-ST-ZIP		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)(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.

SIGNATURE: Nancy J Woodruff Nancy J. Woodruff 2-16-95
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL Title Date

Q07000004