FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #

SECOND JUNGLE DEN VILLAS ASSOCIATION, INC.

SECOND BRIGGE SERVICENS ASSOCIATION, INC.									
Principal Place of Business		Mailing Address						BIBII BIBII HBBI	
1640 JUNO TRAIL ASTOR FL 32102-7940		1640 JUNO TRAIL ASTOR FL 32102-7940							
						3. Date Incorporated or Qualified 01/24/1979	3a. Date of Last 03/08/1		
2. Principal Pla	ice of Business	2a. Mailing Address				4. FEI Number		Applied For	
21		26				59-1966546		Vot Applicable	
Suite, Apt. i	₹, etc.	Suite, Apt. #, etc	27			5. Certificate of Status Desired	1 (Additional Required	
City & State		City & State				6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees			
Zip	Country	Ζφ	Country			8. This corporation has liability for inti			
24	25 29 30		30		Florida Statutes 🔲 Yes 💢 No				
9. Name and Address of Current Registered Agent						10. Name and Address of New Rec	istered Agent		
				81	Name				
CONWAY, LOUIS E. 200 E. GRANADA BLVD.				82	Street Ad	dress (P.O. Box Number is Not Acceptable)			
304 FLAGSHIP FIRST NATIONAL BANK				83					
	D BEACH FL			84	City		85 Zu	o Code	
							FL ``		
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 Signature, typics or product name of registers Lagratized fitted discrete able. (APTE: Registrant Agrating register register them cell schools) DATE									
12.	OFFICERS AND DIRECTORS				signature requ	ADDITIONS/CHANGES TO OFFIC		PRS IN 12	
TITLE			111	TI E		DIRECTOR	Criange	X Addition	
NAME			1 2 N	AME		VANHOOSE, RICHARD			
STREET ADDRESS	1640 JUNO TR #101		1.3 \$	TREET	ADDRESS	1640 JUNO TRAIL # 102			
CHTY-ST-ZIP	ASTOR FL		1		1 - ZIP	ASTOR, FL			
TITLE	PD	DELETE	2 1 TiTLE			DIRECTOR	☐ Change	X Addition	
NAME	MARTIN, CARL		2 2 NAM			DEPALMA, JOHN			
STREET ADDRESS	1640 JUNO TRAIL #101				i i	1640 JUNO TRAIL # 205			
CITY - ST - ZIP TITLE	ASTOR FL	DELETE	2 4 CIT 3 1 11 L		- ZiP	ASTOR FL TREASURER	Change	X Addition	
NAME	SD SHERRARD, JIM(RECORDING)		37 NA			HARTMAN, MARTHA C		ZI Nearron	
STREET ADDRESS	1640 JUNO TR #104	,				537 N UMATILLA BLVD			
CiTY-ST-ZIP	ASTOR FL			ITY-S		JMATILLA, FL 32784			
TITLE				ITLE			☐ Change	Addition	
NAME	STALLARD, JIM		4 2 N	NAME					
STREET ADDRESS	1640 JUNO TRAIL #204		4.3 S	*BEET	ADDRESS				
C+TY - ST - Z+P	ASTOR FL		4 4 C	(TY - S1	T - ZIP				
T-TLE		DELETE	5 1 Ti	ITLE			Change	Addition :	
NAME			5 2 N	AME					
STREET ADDRESS					ADDRESS				
CITY - ST - ZIP		Dougle		ITY - SI	T - ZIP			Addition	
TITLE		DELETE	61 T				☐ Change	☐ vocition	
NAME CIPCEL ADODESC			62 N		NDDD566				
STREET ADDRESS					ADDRESS T. 700				
City-St-ZiP 14. I do hereb	Learning that the information supplied v	with this filing is voluntarily furni		does		y for the exemption stated in Section 119.03	7(3)(k), Florida Statu	tes. 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.

3-20-96