

**FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **746923** (2)

1. Corporation Name

**BUCKINGHAM AIR PARK AND LANDOWNERS ASSOCIATION, INC.**



Principal Place of Business Mailing Address  
**6751 CADET AVENUE FT. MYERS FL 33905**

3. Date Incorporated or Qualified **04/26/1979** 3a. Date of Last Report **04/20/1995**

2. Principal Place of Business 2a. Mailing Address  
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.  
22 City & State 27 City & State  
23 Zip Country 29 Zip Country  
24 25 29 30

4. FEI Number **59-2499589** Applied For 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  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**FEMINELLA, THOMAS**  
**6810 TECH CT.**  
**FT. MYERS FL 33905**

81 Name **Ronald R. Freeman**  
82 Street Address (P.O. Box Number is Not Acceptable) **6941 Circle Dr.**  
83  
84 City **Fort Myers** FL 85 Zip Code **33905**

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 *Ronald R. Freeman* *Ronald R. Freeman* DATE **9 April 1996**

12. OFFICERS AND DIRECTORS

TITLE	<del>DP</del>	<del>DELETE</del>
NAME	<del>HALPER, JAMES</del>	
STREET ADDRESS	<del>6980 CHEROKEE</del>	
CITY-ST-ZIP	<del>FT. MYERS FL</del>	
TITLE	<del>DV</del>	<del>DELETE</del>
NAME	<del>NEMETH, JULIE</del>	
STREET ADDRESS	<del>6761 CHEROKEE</del>	
CITY-ST-ZIP	<del>FT MYERS FL 33905</del>	
TITLE	<del>DSY</del>	<del>DELETE</del>
NAME	<del>LLOYD, MATTHAI</del>	
STREET ADDRESS	<del>6881 CIRCLE DR.</del>	
CITY-ST-ZIP	<del>FT. MYERS FL</del>	
TITLE	D	<input type="checkbox"/> DELETE
NAME	ESPEUT, DEREK	
STREET ADDRESS	14930 CENTER	
CITY-ST-ZIP	FT. MYERS FL	
TITLE	D	<del>DELETE</del>
NAME	FRANA, JOEL	
STREET ADDRESS	6841 TECH CT.	
CITY-ST-ZIP	FORT MYERS FL 33905	
TITLE	DV	<input type="checkbox"/> DELETE
NAME	FREEMAN, RONALD DP	
STREET ADDRESS	6941 CIRCLE DRIVE	
CITY-ST-ZIP	FORT MYERS FL 33905	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	DST	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Blairs Stan	
1.3 STREET ADDRESS	6870 Cherokee	
1.4 CITY-ST-ZIP	Ft. Myers, FL	
2.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	Ashcraft, Robert	
2.3 STREET ADDRESS	6821 Tech Ct.	
2.4 CITY-ST-ZIP	Ft. Myers FL	
3.1 TITLE	DV	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	Neuville, Greg	
3.3 STREET ADDRESS	6950 Cherokee	
3.4 CITY-ST-ZIP	Ft. Myers FL	
4.1 TITLE	DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Freeman Ronald	
4.3 STREET ADDRESS	6941 Circle Dr.	
4.4 CITY-ST-ZIP	Fort Myers FL 33905	
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS	600001783306	
5.4 CITY-ST-ZIP	04/17/96-01017-023	
6.1 TITLE	***61.25	<input type="checkbox"/> Change <input type="checkbox"/> 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)(k), 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: *Ronald R. Freeman* 15 Mar. 1996 (941) 693-1976

CP2E037 (12/95)