

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)**

NONPROFIT CORPORATION ANNUAL REPORT 1996		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 758798 (3)

1. Corporation Name
CAMALE' HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business 7406 CAMALE DRIVE PENSACOLA FL 32504	Mailing Address 7406 CAMALE DRIVE PENSACOLA FL 32504
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3. Date Incorporated or Qualified 06/16/1981	3a. Date of Last Report 05/01/1995
4. FEI Number 59-2574236	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing <input type="checkbox"/> \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032 Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business 21 7417 Camale Drive	2a. Mailing Address 26 7417 Camale Drive
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Pensacola, FL.	City & State 28 Pensacola, FL
Zip 24 32504	Country 25 USA
Zip 29 32504	Country 30 USA

9. Name and Address of Current Registered Agent

**GIBSON, GREGORY J.
7406 CAMALE DR.
PENSACOLA FL 32504**

10. Name and Address of New Registered Agent

81 Name Robert G. Breitenbach
82 Street Address (P.O. Box Number is Not Acceptable) 7417 Camale Drive
83
84 City Pensacola FL 85 Zip Code 32504

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 *Robert G. Breitenbach* **Robert G. Breitenbach** **7/31/96**
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 TD	<input type="checkbox"/> DELETE	1.1 TITLE BIZIC, PATRICIA L	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME BIZIC, PATRICIA L		1.2 NAME	
STREET ADDRESS 7407 CAMALE DR		1.3 STREET ADDRESS	
CITY-ST-ZIP PENSACOLA FL		1.4 CITY-ST-ZIP	
TITLE SD	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME SPARKS, JAMES A.		2.2 NAME	
STREET ADDRESS 7413 CAMALE DR		2.3 STREET ADDRESS	
CITY-ST-ZIP PENSACOLA, FL 00000		2.4 CITY-ST-ZIP	
TITLE PD	<input type="checkbox"/> DELETE	3.1 TITLE PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME GIBSON, GREGORY J.		3.2 NAME Robert G. Breitenbach	
STREET ADDRESS 7406 CAMALE DR.		3.3 STREET ADDRESS 7417 Camale Drive	
CITY-ST-ZIP PENSACOLA, FL 00000		3.4 CITY-ST-ZIP Pensacola, FL 32504	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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)(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: *Robert G. Breitenbach* **Robert G. Breitenbach** **7/31/96** **(904) 477-1781**
Signature and typed or printed name of signing officer or director Date Daytime Phone #

CR2E037 (3/96)