

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **761893** (7)

1. Corporation Name
TRAILER VILLA TENANTS ASSOCIATION, INC.



Principal Place of Business: **820 52ND AVENUE LANE WEST BRADENTON FL 34207**
Mailing Address: **803 - 52ND AVE. PLAZA WEST BRADENTON FL 34207 US**

3. Date Incorporated or Qualified: **02/10/1982**
3a. Date of Last Report: **05/01/1995**

21	2. Principal Place of Business	2a	Mailing Address	4.	FEI Number 65-0035684	Applied For	<input type="checkbox"/>	Not Applicable	
22	Suite, Apt. #, etc.	27	Suite, Apt. #, etc.	5.	Certificate of Status Desired	<input type="checkbox"/>	\$8.75	Additional Fee Required	
23	City & State	28	City & State	6.	Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/>	\$5.00	May Be Added to Fees	
24	Zip	25	Country	29	Zip	30	Country	8.	This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CURRIER, JOHN
820 52ND AVENUE LANE WEST
BRADENTON FL 34207**

81	Name	John Currier
82	Street Address (P.O. Box Number is Not Acceptable)	820 - 52nd Avenue Lane West
83	City & State	Bradenton, FL. 34207
84	City	Bradenton
85	Zip Code	FL 34207

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 **John Currier** *John H. Currier* DATE **3-30-96**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P <input type="checkbox"/> DELETE	1.1 TITLE	President <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CURRIER, JOHN	1.2 NAME	John Currier
STREET ADDRESS	820 52ND AVENUE LANE WEST	1.3 STREET ADDRESS	820 - 52nd Avenue Lane West
CITY-ST-ZIP	BRADENTON FL	1.4 CITY-ST-ZIP	Bradenton, FL 34207
TITLE	VP <input type="checkbox"/> DELETE	2.1 TITLE	Vice-President <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCCOY, JOSEPH	2.2 NAME	Joseph McCoy
STREET ADDRESS	5223-11TH STREET COURT WEST	2.3 STREET ADDRESS	5223 - 11th Street Court West
CITY-ST-ZIP	BRADENTON FL	2.4 CITY-ST-ZIP	Bradenton, FL 34207
TITLE	SD <input type="checkbox"/> DELETE	3.1 TITLE	Secretary <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DAVIS, MABLE	3.2 NAME	Mable W. Davis
STREET ADDRESS	803 - 52ND AVE. PLAZA WEST	3.3 STREET ADDRESS	803 - 52nd Avenue Plaza West
CITY-ST-ZIP	BRADENTON, FL 00000	3.4 CITY-ST-ZIP	Bradenton, FL 34207
TITLE	TD <input type="checkbox"/> DELETE	4.1 TITLE	Treasurer <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CROSSER, JOHN	4.2 NAME	Paul Laethem
STREET ADDRESS	5220 11ST CT. WEST	4.3 STREET ADDRESS	707 - 52nd Avenue Lane West
CITY-ST-ZIP	BRADENTON, FL 00000	4.4 CITY-ST-ZIP	Bradenton, FL 34207
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	Director <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MCCOMB, CARL	5.2 NAME	Carl McComb
STREET ADDRESS	912 52ND AVE. BLVD. WEST	5.3 STREET ADDRESS	912 - 52nd Avenue Blvd. West
CITY-ST-ZIP	BRADENTON, FL 00000	5.4 CITY-ST-ZIP	Bradenton, FL 34207
TITLE	D <input type="checkbox"/> DELETE	6.1 TITLE	Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ANTINORE, WILLIAM	6.2 NAME	Marie Zerlaut
STREET ADDRESS	807 52ND AVE. BLVD.	6.3 STREET ADDRESS	816 - 52nd Avenue Blvd. West
CITY-ST-ZIP	BRADENTON, FL 00000	6.4 CITY-ST-ZIP	Bradenton, FL 34207

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: **John Currier** *John H. Currier* DATE **3-30-96** 941-758-5044

CR2E037 (12/95)