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 # 766084

(8)

HIBER	NIA FOREST CIVIC ASSOC.	INC.			
Principal Place	e of Business	Mailing Address			T TORRES LEGIS BLILE BLILL BLIDL BLICH BLACK BLACK BLACK BLACK BLOCK BLACK BLACK BLACK
770 HIBERNI GREEN COV US	872 LIVE OAK LANE GREEN COVE SPRING! US	S FL 32043			
					3. Date Incorporated or Qualified 12/13/1982 3a. Date of Last Report 05/01/1995
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number Applied For
		26	26		59-2365667 Not Applicable
Suite, Apt. #, etc. Suite, Apt. #, etc.					5. Certificate of Status Desired \$8.75 Additional
27 27					Fee Required
23	•	28			6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
Zip	Country	Zip	Country		Rotal Fund Contribution Added to Fees Rotal Fund Contribution Added to Fees Rotal Fundamental Fees Added to Fees
24	25	29	30		Florida Statutes
	9. Name and Address of Current	Registered Agent			10. Name and Address of New Registered Agent
			81	Name	
	R, CAROLYN B.		82	Street	Address (P.O. Box Number is Not Acceptable)
	ERNIA FOREST DRIVE		83		
GREEN	COVE SPRINGS FL 32043-6338		83		
			84	City	FL 85 Zip Code
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 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 are familiar with, and accept the obligations of, Section 617,0503, Florida Statutes.					
SIGNATURE		The state of the s			
	Signature, typed or printed name of registered agent an		Fr Registered Agen	s gnature r	required wher runstating! DATE
12.	P OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
NAME	FARRINGTON, JOHN T	™ DEFE1E	1 1 TITLE		Change Addition
STREET ADDRESS	770 HIBERNIA FOREST DRIVE		1.2 NAME 1.3 STREET	ADDOCCC	Cunningham, James 872 Live Oak Lane
CHTY-ST-ZIP	GREEN COVE SPRINGS FL		1.4 CITY - ST		Green Cove Springs, FL 32043
TITLE	V	™ DELETE	2.1 TITLE	- 211	V ⊠ Change Addition
NAME	CUNNINGHAM, JAMES	Ť	2 2 NAME		
STREET ADDRESS	872 LIVE OAK LANE		2 3 STREET	ADDRESS	verschleiser, Barry 983 Hibernia Forest Dr.
CITY-ST-ZIP	GREEN COVE SPRINGS FL		2 4 CHTY-S	T-ZIP	Green (ove Springs FL 32043
TITLE	Ţ	☐ DELETE	3 1 TITLE		Change Addition
NAME	CUNNINGHAM, SONYA		3 2 NAME		
STREET ADDRESS	872 LIVE OAK LANE		3 3 STREET		
CITY-ST-ZIP TITLE	GREEN COVE SPRINGS FL	⋈ DELETE	3.4 CiTY-S	I · ZIP	
NAME	FITZGERALD, CHRISTIE M	MACTER	4.1 TIFLE 4 2 NAME		D MCChange Addition
STREET ADDRESS	7403 FLEMING ISLAND RD		4.3 STREET	ADDRESS	Johnson James 884 Live Oak Lane
CITY-ST-ZIP	GREEN COVE SPRINGS FL		4.4 CITY - ST		Grien Core Springs FL 32043
TITLE	D	™ DELETE	5 1 TITLE	En	Change Addition
NAME	WILLIAMS, ROSE		5.2 NAME		Lawrence Pauline
STREET ADDRESS	790 HIBERNIA FOREST DRIVE		5 3 STREET A	ADDRESS	1005 Hiberoia Forest DC
CITY-ST-ZIP	GREEN COVE SPRINGS FL		5 4 CITY-ST	- ZIP	Green Cove Springs FL 32043
TITLE	D	⊠ DELETE	6.1 TITLE		D Addition
NAME STREET ADDRESS	VERSCHLEISER, BARRY		6.2 NAME		settle Julie
STREET ADDRESS	983 HIBERNIA FOREST DRIVE		6.3 STREET A		1008 Hibernia Forest Dr
14. I do hereby	GREEN COVE SPRINGS FL certify that the information supplied with	h this filma is voluntarily formis	640IIY-SI shed and does	not our	Green Cove Springs FL 32043
oath; that I		report or supplemental annu- ion or the receiver or trustee	iai report is true		inity for the exemption stated in Section 119.0/(3)(k), Florida Statutes. I further courale and that my signature shall have the same legal effect as if made under e this report as required by Chapter 617, Florida Statutes; and that my name

SIGNATURE:

4-29-96 (904)777-7645

CR2E037 (12/95)