

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 # 769181 (9)
1. Corporation Name
DIAMOND HEAD POINT HOMEOWNER'S ASSOCIATION, INC.



Principal Place of Business Mailing Address
**501 N CAUSEWAY
NEW SMYRNA BEACH FL 32169**

3. Date Incorporated or Qualified **06/30/1983** 3a. Date of Last Report **02/08/1995**
4. FEI Number **59-2329451** Applied For
Not Applicable
5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**
6. Election Campaign Financing ☐ **\$5.00 May Be Added to Fees**
7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

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

9. Name and Address of Current Registered Agent

**HARGREAVES, LUCY A
501/503 N CAUSEWAY
#504
NEW SMYRNA BEACH FL 32169**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
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 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, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY-ST-ZIP
DP GRABIAK, THEODORE 501 N CAUSEWAY NEW SMYRNA BEACH FL
SD THOMAS, DOROTHY E. 501 N CAUSEWAY NEW SMYRNA BEACH FL 32169
D HARGREAVES, LUCY A 501 N CAUSEWAY NEW SMYRNA BEACH FL 32169
TD GRABIAK, THEODORE 501 N CAUSEWAY NEW SMYRNA BCH. FL 32169
VD DICKERSON, RONALD 501 N. CAUSEWYA NEW SMYRNA BCH FL 32169
TD LAYTON, LEROY 501 N CAUSEWAY NEW SMYRNA BEACH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP
SD JILL TYLER 501 N. CAUSEWAY NEW SMYRNA BCH FL 32169
VD RAYMOND HEATH 501 N. CAUSEWAY NEW SMYRNA BCH FL 32169

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:

LUCY A. HARGREAVES
Lucy A. Hargreaves

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/22/96
Date

904-423-5498
Daytime Phone #

CR2E037 (12/95)