NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # 771032**

BIENVILLE SQUARE TOWNHOUSE OWNERS' ASSOCIATION,

Principal Place of Business	Mailing Address		
P.O. BOX 1844 FT WALTON BCH FL 32549	P.O. BOX 1844 FT WALTON BCH FL 32549		
us	US		

## **FILED** Feb 23, 1999 8:00 am § Secretary of State

02-23-1999 90034 024 \*\*\*\*61.25

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Principal Place	of Business	Mailing Address	·		
P.O. BOX 1844	•	P.O. BOX 1844			A A I I A A I A I A I A I A I A I A I A
FT WALTON B	CH FL 32549	FT WALTON BCH FL 32549			
US		US		t 168711 (881) 1888) stats 88130 lista stat atom	BIBIL BIBIL GIALL BIBIL BIBIL INN!
				·	
2. Principal Pl	ace of Business	2a. Mailing Address		3. Date incorporated or Qualifed	
21		26		11/02/1983	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		4. FEI Number	X Applied For
22		27		59-2591906	Not Applicable
City & State	9	City & State		5. Certifcate of Status Desired	\$8.75 Additional Fee Required
<b>23</b>   Zip	Country	28	Country	6. Election Campaign Financing	\$5.00 May Be
<b>—</b> '	25	29 36	¬ ·	Trust Fund Contribution	Added to Fees
24	9. Name and Address of Curren		<b>,</b>	10. Name and Address of New Registere	
			81 Name	aven Tanub	
HUNT, GA	LRY			Address (P.O. Box Number is Not Acceptable)	
731 SAILF			1.15	THUGHES ST. #E-	.6
GULF BRE			83 57	Was Tool Boach #	
	ON BEACH FL 32548		84 City	WALL ON ISEACH, ICH	. 85 Zip Code
				/ ~0/:	L 32548
11. Pursuant	to the provisions of Sections 617.0502	2 and 617.1508, Florida Statutes,	, the above-named o	corporation submits this statement for the purpose oration's board of directors. I hereby accept the app	of changing its registered
agent. I ar	m familiar with, and accept the obligat	ions of, Section 617.0503, Florid	a Statutes.	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	1000
SIGNATURE	E. marquesis	Cellering (5)	ecretary	Treasurer /- 12	3-1449
12.	Signature, typed or printed name of registered agen OFFICERS AN		egistered Agent signature g	ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	P	DELETE	1,1 TITLE	PCAYER) - PRESIDEN	
NAME	HUNT, GARY	•	1.2 NAME	CAVER TOSEPH R.	
STREET ADDRESS	731 SAILFISH DR.		1.3 STREET ADDRESS	CAYER, JOSEPH R.	6
CITY-ST-ZIP	FORT WALTON BEACH FL		1.4 CITY-ST-ZIP	FTWALTON BCh, FL. 3:	2548
TITLE	VP	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	CUEVAS, CAROLE		2.2 NAME		
STREET ADORESS	115 HUGHES ST E-5		2.3 STREET ADDRESS		
CITY-ST-ZIP	FT. WALTON BEACH FL 32548	<u></u>	2.4 CITY-ST-ZIP		
TITLE	TSD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME (	VERING, E. MARGUERITE		3.2 NAME		
STREET ADDRESS	115 HUGHES ST, A-6		3.3 STREET ADDRESS		
CITY-ST-ZIP	FT WALTON BEACH FL	<b>⊠</b> DELETE	3.4. CITY-ST-ZIP		Change Addition
TITLE	O CAVED LOCEDIA D	TA DELEIE	4.1 TTLE	D DOOM MARCIA	
NAME	CAYER, JOSEPH R 115 HUGHES ST E-6		4. 2 NAME 4.3 STREET ADDRESS	CAPRON, MARCIA M.	×207
STREET ADDRESS			4.3 STREET ADDRESS	NAVARRE, FLI 32566	
CITY-ST-ZIP TITLE	FT WALTON BCH FL 32548	☐ DELETE	4.4 CITY-ST-ZIP 5.1 TITLE	1	☐ Change ☐ Addition
	ELLIC MADANDA		5.2 NAME	•	<b>3</b>
NAME STORET ADDRESS	ELLIS, MARANDA 115 HUGHES ST B-7		5.3 STREET ADDRESS		
STREET ADDRESS	FT. WALTON BEACH FL 32548		5.4 CITY-ST-ZIP		
CITY-ST-ZIP TITLE	D	DELETE	6.1 TITLE	D	Change
NAME	CHERRY, EDWARD L		6.2 NAME		•
STREET ADDRESS	115 HUGHES ST R-4		6.3 STREET ADDRESS	RAKAR, JOHN J. ILE HUGHES St. A-4	

CITY-ST-ZIP FT WALTON BCH FL 32548

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or suppliemental annual report/s 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 attactiment with an address, with all other like empowered.

SIGNATURE:

85-6-243-7288