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Feb 06 1997 8:00am
Secretary of State

NONPROFIT CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # N00375 (8)

1. Corporation Name

BEAUMONT HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

Mailing Address

6590 SW 13TH STREET
PLANTATION FL 33317-5154
US

6590 SW 13TH STREET
PLANTATION FL 33317-5154
US

3. Date Incorporated or Qualified
12/13/1983

3a. Date of Last Report
01/31/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number
65-0216570

Applied For
Not Applicable

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

22 City & State

27 City & State

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

23 Zip

Country

28 Zip

Country

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes Yes No

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MACK, HENRY W
6590 SW 13 ST
PLANTATION FL 33317

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD DELETE
NAME MACK, HENRY W.
STREET ADDRESS 6590 S.W. 13 STREET
CITY-ST-ZIP PLANTATION FL

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE DS DELETE
NAME MCLEOD, JULIA
STREET ADDRESS 6560 SW 13TH ST
CITY-ST-ZIP PLANTATION FL

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE DT DELETE
NAME DYTKOWSKI, ROBERT J.
STREET ADDRESS 6540 SW 13TH ST
CITY-ST-ZIP PLANTATION FL

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE D DELETE
NAME GRADA, GEORGE
STREET ADDRESS 1211 SW 65TH AVE
CITY-ST-ZIP PLANTATION FL

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE VD DELETE
NAME KUCHENREUTHER, LEO
STREET ADDRESS 1211 SW 65TH ST
CITY-ST-ZIP PLANTATION FL

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE D DELETE
NAME MCLEOD, ALISTAIR
STREET ADDRESS 6540 SW 13TH ST
CITY-ST-ZIP PLANTATION FL

6.1 TITLE Change Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby 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 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:

Sandra B. Mortham
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/20/97 (305) 394-2493
Date Daytime Phone # 0036588

CR2E037 (9/96)