

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 # **NO1022 (5)**
1. Corporation Name
NEW HAVEN RECREATION ASSOCIATION, INC.



Principal Place of Business: **1400 NEW HAVEN DR LARGO FL 34641**
Mailing Address: **1400 NEW HAVEN DR LARGO FL 34641**

3. Date Incorporated or Qualified: **01/20/1984**
3a. Date of Last Report: **05/01/1995**

21	22	23	24	25	26	27	28	29	30	4. FEI Number 59-2347196	Applied For Not Applicable
2. Principal Place of Business		2a. Mailing Address		5. Certificate of Status Desired <input type="checkbox"/>		5. Certificate of Status Desired <input type="checkbox"/>		5. Certificate of Status Desired <input type="checkbox"/>		\$8.75 Additional Fee Required	
22		27		5. Certificate of Status Desired <input type="checkbox"/>		5. Certificate of Status Desired <input type="checkbox"/>		5. Certificate of Status Desired <input type="checkbox"/>		\$5.00 May Be Added to Fees	
23		28		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>		\$5.00 May Be Added to Fees	
24		29		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No			

9. Name and Address of Current Registered Agent
**WEIR, MARIE T.
1404 14TH CIRCLE SOUTHEAST
LARGO FL 34641**

10. Name and Address of New Registered Agent
81 Name: **Carl Whetsel**
82 Street Address (P.O. Box Number is Not Acceptable):
83 **1204 16 Circle SE**
84 City: **Largo** FL 85 Zip Code: **34641**

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: *Carl Whetsel* **Carl Whetsel** DATE: **2-5-96**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input checked="" type="checkbox"/> DELETE	1.1 TITLE	President PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	WEIR, MARIE T.	1.2 NAME	Carl Whetsel
STREET ADDRESS	1404 14TH CIRCLE	1.3 STREET ADDRESS	1204 16 Circle SE
CITY-ST-ZIP	LARGO FL	1.4 CITY-ST-ZIP	Largo Fl 34641
TITLE	V <input checked="" type="checkbox"/> DELETE	2.1 TITLE	Vice President <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PENNA, LOUISE	2.2 NAME	Bob Poechman
STREET ADDRESS	1510 16TH CIRCLE	2.3 STREET ADDRESS	1200 11 Circle SE
CITY-ST-ZIP	LARGO FL	2.4 CITY-ST-ZIP	Largo Fl 34641
TITLE	TD <input checked="" type="checkbox"/> DELETE	3.1 TITLE	Treasurer <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MACKENZIE, WILLIAM	3.2 NAME	Charles Piper
STREET ADDRESS	1210 10TH CIR SE	3.3 STREET ADDRESS	1302 13 Circle SE
CITY-ST-ZIP	LARGO FL	3.4 CITY-ST-ZIP	Largo Fl 34641
TITLE	SD <input type="checkbox"/> DELETE	4.1 TITLE	Secretary <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KELLY, DOROTHY	4.2 NAME	Mary Jane Malaszek
STREET ADDRESS	1227 14TH CIRCLE	4.3 STREET ADDRESS	1220 11 Circle SE
CITY-ST-ZIP	LARGO FL	4.4 CITY-ST-ZIP	Largo Fl 34641
TITLE	ST <input type="checkbox"/> DELETE	5.1 TITLE	Rep. <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MALASZEK, MARY JANE	5.2 NAME	Bill McKenzie
STREET ADDRESS	1220 11TH CIRCLE	5.3 STREET ADDRESS	1210 10 Circle SE
CITY-ST-ZIP	LARGO FL	5.4 CITY-ST-ZIP	Largo Fl 34641
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	800001765618
CITY-ST-ZIP		6.4 CITY-ST-ZIP	-04/02/96--01008--016

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: *Carl Whetsel* **Carl Whetsel** DATE: **813-581-0939**

CRE037 (12/95)