

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 # **N07454 (4)**

1. Corporation Name
THE VILLAGE AT BENTLEY PARK HOMEOWNERS' ASSOCIATION, INC.

21797



Principal Place of Business: C/O UNIVERSITY PROPERTIES, 824 E FLETCHER AVE, TAMPA FL 33612
Mailing Address: C/O UNIVERSITY PROPERTIES, 824 E FLETCHER AVE, TAMPA FL 33612

3. Date Incorporated or Qualified: **02/05/1985**
3a. Date of Last Report: **03/13/1995**
4. FEI Number: **59-2777343**
5. Certificate of Status Desired: \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: \$5.00 May Be Added to Fees
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: Yes No

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

9. Name and Address of Current Registered Agent
**RAYBURN, LAURA J. P
1968 BAYSHORE BLVD.
824 E FLETCHER AVE
DUNEDIN FL 34698**

10. Name and Address of New Registered Agent
81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83.
84. City
85. Zip Code: **FL**

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: _____ (NOTE: Registered Agent signature required when re-registering) DATE: _____

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	MARQUARDT, MARK	
STREET ADDRESS	2467 BENTLEY DR.	
CITY-ST-ZIP	PALM HARBOR FL	
TITLE	VP D	<input type="checkbox"/> DELETE
NAME	TARGAKIS, MICHAEL	
STREET ADDRESS	2672 BENTLEY DR.	
CITY-ST-ZIP	PALM HARBOR FL	
TITLE	GD	<input checked="" type="checkbox"/> DELETE
NAME	HERDLITCHKA, PATRICIA	
STREET ADDRESS	2619 BENTLEY DR.	
CITY-ST-ZIP	PALM HARBOR FL	
TITLE	TD	<input checked="" type="checkbox"/> DELETE
NAME	MCCLORY	
STREET ADDRESS	2697 BENTLEY DR.	
CITY-ST-ZIP	PALM HARBOR FL	
TITLE	VP D	<input type="checkbox"/> DELETE
NAME	WEINER, GEORGE	
STREET ADDRESS	2629 BENTLEY DR.	
CITY-ST-ZIP	PALM HARBOR FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	BALAMES, PETER	
1.3 STREET ADDRESS	2502 BENTLEY DRIVE	
1.4 CITY-ST-ZIP	PALM HARBOR, FL. 34684	
2.1 TITLE	STD	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	ENGLISH, VERNON	
2.3 STREET ADDRESS	2442 BENTLEY DRIVE	
2.4 CITY-ST-ZIP	PALM HARBOR, FL. 34684	
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

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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: *Mark Marquardt*
DATE: 2/14/96
FILING FEE: 813
CORPORATION NUMBER: 59-2777343

CR2E037 (12/95)