FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT #
1. Corporation Name N07712

(5)

HOMEOWNERS OF BAY PALMS M.H.P., INC.

Principal Place of Business Mailing Address					irdi diğir diğir diğir diğir diğir Tiğir IRDI
		25163 MARION AVENUE PUNTA GORDA FL 33950			
				3. Date Incorporated or Qualified 02/19/1985	3a. Date of Last Report 01/30/1995
2. Principal Pia 21	ace of Business	2a. Mailing Address 26		4. FEI Number 59-2498046	Applied For Not Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	9	City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for in	
24	25 September 25 Se		30	L	Yes No
	9. Name and Address of Curren	it Registered Agent	81 Name	10. Name and Address of New Re	
KARP V	VILLIAM R Edu	. Wotitzky		Edw. Wotit	2 Ky
		3 Taylor Str	82 Street A	Address (P.O. Box Number is Not Acceptable	Street
PUNTA (PODOA EL POREN	into Gorda	83		
		FL 33950	84 City	D. 1 Co.1.	EL 85 Zip Code
11. Pursuant t	to the provisions of Sections 617.0502	and 617.1508. Florida Statutes	the above-named co	rooration submits this statement for the purp	ose of changing its registered office
or register familiar wit	ed agent, or both, in the State of Florid th, and accept the obligations of Secti	da. Such change was authorized ion 617,0503. Borida Statutes.	by the corporation's	reporation submits this statement for the purp board of directors. I hereby accept the appoi	intment as registered agent. I am
SIGNATURE	10/6/3	4		2/1/	96
	Signature, typed or printed name of registered agent		Registered Agent signature re	·	DATE
12. TILLE	OFFICERS ANI	D DIRECTORS (DAELETE	13.	ADDITIONS/CHANGES TO OFFICE	DERS AND DIRECTORS IN 12 Addition Addition
NAME	HUNT, FRANK R., JR.	Maccine	12 NAME	Urbanck, Wm	P Charge
STREET ADDRESS	25163 MARION AVE. LOT 34		1 3 STREET ADDRESS	25163 Marion A	4 LA+ 45
CITY-ST-ZIP	PUNTA GORDA FL		1.4 CHTY-ST-ZIP	Punta Gorda	
TITLE	SO	DELETE	21 TITLE	. <i>V</i>	Change
NAME	ESSEX, W. J		2.2 NAMÉ	Earl Grice	
STREET ADDRESS	25163 MARION AVENUE, LOT	1 #29	2 3 STREET ADDRESS	25163 Marion	•
CITY-ST-ZIP	PUNTA GORDA FL		2 4 CITY-ST-ZIP	Punta Gorda, F	
TITLE	D COLOR TABL	DELETE	31 TITLE	District	☐ Change ☐ Addition
NAME	GRICE, EARL		3.2 NAME	Jerry Caparco	A . 1 . 4 15
STREET ADDRESS	25163 MARION AVE., LOT #5)	3 3 STREET ADDRESS	25/63 Marion A	
CITY - ST - ZIP TITLE	PUNTA GORDA FL V	DELETE	3.4. C(TY-ST-Z)P 4.1 TITLE	Punta Gorda	Change PAddition
NAME	urbanek, William	Посселе	4 2 NAME	TD	□ onange □ Audition
STREET ADDRESS	25163 MARION AVE. LOT 45		4.3 STREET ADDRESS	Nelda L Cain	A 1 1
CITY-ST-ZIP	PUNTA GORDA FL		4.4 CHTY-ST-ZIP	25163 Marion	AV. LOT //
TITLE	TD	DELETE	51 TITLE	Ponta Gorda	☐ Change ☐ Addition
NAME	GOSSELIN, REGINALD M SR.		5.2 NAME		
STREET ADDRESS	25163 MARION LOT 1		5 3 STREET ADDRESS		
CITY - ST - ZIP	PUNTA GORDA FL		5 4 CITY - ST - ZIP		The state of the s
TITLE		DELETE	61 THTLE		Change Addition
NAME			6 2 NAME		
STREET ADDRESS			6 3 STREET ADDRESS		
CiTY-ST-ZiP	w certify that the information supplied s	with this filing is valuntarily furnic	64 CITY-ST-ZIP	lify for the exemption stated in Section 119.0	17/31/W Finrida Statutas I further
certify that	t the information indicated on this annu	ual report or supplemental annua	al report is true and ac	curate and that my signature shall have the s	ame legal effect as if made under
appears in	ram an onicer or director or the corpo i Block 12 or Block 13 if changed, or c	manori or the receiver or trustes i on an attachment with an addres	етпрометед то ехесит 88.	e this report as required by Chapter 617, Flor	nua oratutes; and that my name

SIGNATURE:

2-1-96 941-637-8297

CR2E037 (12/95)