FILE NOW: FILING FEE IS \$61.25

NÖNPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT # N09693

1. Corporation Name

NC 3-18-99

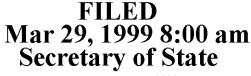
BCARC HOMES II, INC.

Woodsmere Estates Inc.

Principal Place of Business

SIGNATURE:

Mailing Address



03-29-1999 90075 002 \*\*\*\*61.25

980 BRIDLE LN ROCKLEDGE FI US								9,511 51 <b>5</b> 11 1 5111 1 1 1 1 1 1		
2. Principal Pl	ace of Business	2a. Mailing Address		<u>.</u>		3. Date Incorporated or Qualifed				
21		26				06/11/1985				
Suite, Apt. #, etc.		Suite, Apt. #, etc.				59-2864284			opplied For	
City & State		City & State			"	5. Certificate of Status Desired	□ ·	\$8.75 Additional Fee Required		
Zip	Country	Zip	Country			Election Campaign Financing     Trust Fund Contribution		\$5.00 May Be Added to Fees		
24	9. Name and Address of Current Registered Agent					10. Name and Address of New R	egistered A			
	5. Name and Address of Current	Veftiare on value	81	Name						
DOEGO E	LANCE D		20	24	A -1 -1	- (D.O. Bay Number in Not Accepte	bla)	<del></del>		
DRESSLER, JAMES R 110 DIXIE LANE			82 Street Address (P.O. Box Number is			ss (P.O. Box Number is Not Accepta				
	EACH FL 32931		83							
COCOA BI	EACH PL 32931		0.4	Cit.				85 Zip	Code	
	•		84	City			FL			
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Fiorida 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 Fiorida. 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.	Signature, typed or printed name of registered agent:  OFFICERS AND	······································	13.	it aidiema i	equireo .	ADDITIONS/CHANGES TO OF	ICERS AND	DIRECT	ORS IN 12	
TITLE	S	☐ DELETE	1,1 TITLE		T			Change		
NAME	KRAFTCHICK, MS. JUDY	<del>-</del> ·	1.2 NAME							
STREET ADDRESS	6370 N WICKHAM RD			ADDRESS	İ				.	
	MELBOURNE FL		1.4 CITY-S			•	,			
CITY-ST-ZIP	SE SE	☐ DELETE	2.1 TITLE		FD			Change	Addition	
NAME	SHINN, MR. GREGG	_	2.2 NAME							
STREET ADDRESS	1934 S FISKE BLVD -		2.3 STREE	ADORESS		والمراب والمستحدد والمستحد والمستحدد والمستحد والمستحدد والمستحد والمستحدد والمستحد والمستحدد والمستحدد والمستحدد والمستحدد والمستحدد والمستحدد وا	·	` .		
CITY-ST-ZIP	<u></u>		2.4 CITY-ST-ZIP							
TITLE	NO.	☐ DELETE	3.1 TITLE		CC			Change	Addition	
NAME	NUTTING, MR CHARLES		3.2 NAME						1	
STREET ADDRESS	719 E HIBISCUS BLVD		3.3 STREE	TADDRESS	1				ļ	
CITY-ST-ZIP	MELBOURNE FL		3.4. CITY-S	ST-ZIP						
TITLE	D	₹ DELETE	4.1 TITLE		AP	a Ruan	^	Change	Addition	
NAME	OSBORNE, MAC	•	4. 2 NAME		100	rard Ryan 70 S. Fiske	BIVD.		. (	
STREET ADDRESS	C/O TRAVIS HDW, 300 DELANNO	DY AVE	4.3 STREE	TADDRESS	16	70 S. Fiske	<b>3</b> -	S.C.	- 1	
CITY-ST-ZIP	COCOA FL		4.4 CITY-S	T-ZIP	<u> </u>	nockledge FL	_ >0	74.25		
TITLE	PD	☐ DELETE	5.1 TITLE	•		• /		Change	Addition	
NAME	SCHWEINSBERG, JOHN R. JR.		5.2 NAME		)				-	
STREET ADDRESS	850 BELHURST LN		5.3 STREE							
CITY-ST-ZIP	ROCKLEDGE FL		5.4 CITY-S	T-ZIP	<del> </del>	<u> </u>		☐ Change	Addition	
TITLE	Τ	☐ DELETE	6.1 TITLE		ļ			☐ Change	E POUIDON [	
NAME	SWIFT, BARRY		6.2 NAME	nn===	1					
STREET ADDRESS			6.3 STREE						ĺ	
CITY-ST-ZIP	ROCKLEDGE FL	Alia filina along and acceptation to	6.4 CITY-S		d in C	ection 110 07/3\(ii) Florida Statutas	I further cert	ify that the	a information	
14. I 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 indicated on this 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 indicated on this annual report is true and that my signature shall have the same legal effect as if made under oath; that I am an indicated on this annual report is true and that my signature shall have the same legal effect as if made under oath; that I am an indicated on this 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 indicated on this 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 indicated on this 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 indicated on this 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 indicated on this 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 indicated on this 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 indicated on this accurate and the same legal effect as if made under oath; that I am an indicated on this accurate and the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effect as if made under oath; the same legal effec										
indicated on this annual report of suppliemental supplie										

RE REQUIRED