FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

DOCUMENT # **N17734** **(7)**

1. Corporation Name

BAYBERRY ESTATES HOMEOWNERS'S ASSOCIATION, INC.

Principal Place of Business	Mailing Address
3919 BAYBERRY DR MELBOURNE FL 32901	3919 BAYBERRY DR MELBOURNE FL 32901

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/12/1986
3a. Date of Last Report: 05/01/1994
4. FEI Number: 59-2802373 ☐ Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State	28 City & State
24 Zip / 25 Country	29 Zip / 30 Country

9. Name and Address of Current Registered Agent

HERBERT, DAVID
4125 BAYBERRY DR
MELBOURNE FL 32901

10. Name and Address of New Registered Agent

81 Name: Robert J. Bencze
82 Street Address (P.O. Box Number is Not Acceptable): 3948 Bayberry dr
83
84 City: Melbourne FL 85 Zip Code: 32901

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: Robert J. Bencze
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	VP	11 TITLE	V	☒ Change ☐ Addition
NAME	POWELL, LIB	12 NAME	Jean Schroedel	
STREET ADDRESS	4030 BAYBERRY DR	13 STREET ADDRESS	4101 Bayberry dr	
CITY-ST-ZIP	MELBOURNE FL	14 CITY-ST-ZIP	Melbourne FL 32901	
TITLE	D	21 TITLE		☒ Change ☐ Addition
NAME	GREENE, MAUDE	22 NAME	Connie McMullen	
STREET ADDRESS	4051 MARLBERRY LANE	23 STREET ADDRESS	4001 Bayberry Dr	
CITY-ST-ZIP	MELBOURNE FL	24 CITY-ST-ZIP	Melbourne FL 32901	
TITLE	D	31 TITLE		☐ Change ☐ Addition
NAME	GIFTT, NAOMIE	32 NAME		
STREET ADDRESS	3963 BAYBERRY DR	33 STREET ADDRESS		
CITY-ST-ZIP	MELBOURNE FL	34 CITY-ST-ZIP		
TITLE	D	41 TITLE	D	☒ Change ☐ Addition
NAME	MARSCHHAUSER, GEORGE	42 NAME	Tony Carulli	
STREET ADDRESS	3928 BAYBERRY DR	43 STREET ADDRESS	3969 Bayberry dr	
CITY-ST-ZIP	MELBOURNE FL	44 CITY-ST-ZIP	Melbourne FL 32901	
TITLE	S	51 TITLE		☐ Change ☐ Addition
NAME	HARRIS, MURIEL	52 NAME		
STREET ADDRESS	3952 BAYBERRY DR	53 STREET ADDRESS		
CITY-ST-ZIP	MELBOURNE FL	54 CITY-ST-ZIP		
TITLE	P	61 TITLE	P	☒ Change ☐ Addition
NAME	HERBERT, DAVID E	62 NAME	Robert J. Bencze	
STREET ADDRESS	4125 BAYBERRY DR	63 STREET ADDRESS	3948 Bayberry dr	
CITY-ST-ZIP	MELBOURNE FL	64 CITY-ST-ZIP	Melbourne FL 32901	

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)(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: Robert J. Bencze 3/11/95 407 484-0434
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0035177