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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # N35646

1. Corporation Name

GREATER SUN CITY CENTER BEAUTIFICATION CORPORATION

Principal Place of Business

2020 CLUBHOUSE DR
 SUN CITY FL 33573
 US

Mailing Address

PO BOX 5702
 SUN CITY FL 33571
 US



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

12/13/1989

22 City & State

27 City & State

4. FEI Number
 59-3058095

Applied For
 Not Applicable

23 Zip Country

28 Zip Country

5. Certificate of Status Desired \$8.75 Additional Fee Required

24

25

Country

29

Country

30

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BEYER JR, R.C.
 2020 CLUBHOUSE DRIVE
 SUITE 1400
 SUN CITY FL 33571

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85

Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS	
TITLE	PD <input type="checkbox"/> DELETE
NAME	BICERT, NANCY
STREET ADDRESS	902 MCDANIEL ST
CITY-ST-ZIP	SUN CITY FL 33573
TITLE	TD <input checked="" type="checkbox"/> DELETE
NAME	BROSTEK, FRANK
STREET ADDRESS	2020 CLUBHOUSE DRIVE
CITY-ST-ZIP	SUN CITY CENTER FL 33571
TITLE	VD <input type="checkbox"/> DELETE
NAME	EATON, DON
STREET ADDRESS	2054 PRESTANCIA LN
CITY-ST-ZIP	SUN CITY FL 33573
TITLE	SD <input type="checkbox"/> DELETE
NAME	BEYER, R C JR
STREET ADDRESS	2020 CLUBHOUSE DRIVE
CITY-ST-ZIP	SUN CITY CENTER FL 33571
TITLE	D <input type="checkbox"/> DELETE
NAME	BUTLER, WILLIAM
STREET ADDRESS	714 MCCALLISTER AVE
CITY-ST-ZIP	SUN CITY FL 33573
TITLE	VD <input type="checkbox"/> DELETE
NAME	NICHOLAS, R.L
STREET ADDRESS	2009 DEL WEBB BLVD W
CITY-ST-ZIP	SUN CITY FL 33573

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	VD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	C.E. BROWN
1.3 STREET ADDRESS	1015 RADISON AVE.
1.4 CITY-ST-ZIP	SUN CITY CENTER, FL. 33573
2.1 TITLE	TD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	BILL COWING
2.3 STREET ADDRESS	2020 CLUBHOUSE DRIVE
2.4 CITY-ST-ZIP	SUN CITY CENTER, FL. 33573
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	

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 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 as an attachment with an address, with all other like empowered.

SIGNATURE: *[Signature]* SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR: BEYER JR R.C. DATE: 3/29/99 DAYTIME PHONE #: 820 820

CR2E037 (1/98)