## **FILE NOW: FILING FEE IS \$61.25**

**NONPROFIT CORPORATION ANNUAL REPORT** 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

POCUMENT #

(5)

TEQUESTA CIVIC ASSOCIATION, INC.

FILED										
May 05 1998 8:00am										
Secretary of State										

Principal Place of Business Malling Address									( 100)1199 EN BION OIDEN ENIN IN	ON INTERNATION	ATT BARAT BIRAT B	/1011 <b>010</b> 11 1 <b>00</b> 1	
46 CHESTNUT TRAIL 46 CHESTNUT TRAIL								-	3. Date incorporated or Qualifie				
TEQUESTA FL 33469 TEQUESTA FL 33469								1	08/02/1991	Q.			
								ŀ	4. FEI Number			pplied For	
									65-0285344			ot Applicable	
Principal Place of Business     Mailing Address												Additional	
21			20	26					Certificate of Status Desired			equired	
Sulte, Apt. #, etc. Suite, Apt. #, etc.									6. Election Campaign Financing		\$5.00	May Be	
22 City & Stat	City & State	State				Trust Fund Contribution		Added to					
23 28									7. Is this nonprofit corporation a homeowners association?				
Zip Country				Zip Country			-	8. This corporation owes or has paid the current year intangible					
24	26			29 30				Personal Property Tax due June 30. Yes No					
	9. Name	and Address o	d Current Rec	latered Agent					10. Name and Address of New Registered Agent				
						81	Nam	ne .					
DOWNEY, STEPHEN A.						82	Stree	et Address	ress (P.O. Box Number is Not Acceptable)				
	FVIEW DR					<u> </u>	L						
TEQUES	STA FL 334	39				83							
						84	City		, <del>, , , , , , , , , , , , , , , , , , </del>	——————————————————————————————————————	85 Zip	Code	
11. Pursuant	to the provisi	one of Sections	617 0502 and	617 1509 Flo	ida Statutas	the ebou		ad oornor	ation eubmits this statement for th	FL	a l	***************************************	
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 re-	gistered agent and t	itle if applicable.	(NOTE: Re	egistered Ag	ent aignatu	ura required y	when reinstating)	DATE			
12.		OFFIC	ERS AND DIR			13.			ADDITIONS/CHANGES TO OF	FICERS AND	DIRECTOR	RS IN 12	
TITLE	D		_		DELETE	1.1 TITLE					Change	☐ Addition	
NAME	SHANNON, WILLIAM E			1.2 N									
STREET ADDRESS	s 46 CHESTNUT TRAIL TEQUESTA FL						ADDRESS	S					
CITY-ST-ZIP TITLE	D	IA FL		П	ELETE	1.4 CITY-5	T-ZIP	<del>- </del> -			T10	- I a date	
NAME		. PAUL P			ECCIE	2.1 TITLE 2.2 NAME					Change	L_i Addition	
STREET ADDRESS		HILL TRAIL	w				ADDRESS	.					
CITY-ST-ZIP	TEQUES		**			2.4 CITY-		°					
TITLE	D			DELETE 3.1 TO			31-7IF	1			Change	Addition	
NAME	DOWNEY, STEPHEN A			<del></del>	3.2 NAM								
STREET ADDRESS				3.3 \$			ADDRESS	s				ľ	
CITY-ST-ZIP	TEQUESTA FL						ST-ZIP						
TITLE	D				ELETE	4.1 TITLE					Change	Addition	
NAME	PAPP, R					4. 2 NAME							
STREET ADDRESS	21 PALMETTO WAY TEQUESTA FL			4.3			4.3 STREET ADDRESS					ŀ	
CITY-ST-ZIP		IA FL			***	4.4 CITY-S	T-ZIP						
TITLE	O SCHALLED ELIZABETH			1			5.1 TITLE				Change	☐ Addition	
NAME CTREET ADDRESS	A						5.2 NAME						
STREET ADDRESS	TEALFATA M						5.3 STREET ADDRESS						
CITY-\$T-ZIP TITLE	D	1016		776	ELETE	5.4 CITY - S 6.1 TITLE	1 - ZIP	+			Change	Addition .	
NAME	_	WAAL, NEAL		ا ت		6.2 NAME						☐ AUGINOR	
STREET ADDRESS		IT CLUB PLAC	)F				ADDRESS	, [					
CITY-ST-ZIP	TEQUESTA FL					6.3 STREET ADDRESS 6.4 CITY - ST - ZIP							
OTTO OT AR			· · · · · · · · · · · · · · · · · · ·			0.4 OHT - 5	1.74,						

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 on an attachment with an address.

GNATURE:

WILLIAM E. SHANHON

4/26/58/561-627-2(172)

4/26/58 561-627-2112