

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N93000001693 (1)

1. Corporation Name

ARC FLAGLER COUNTY, INC.



Principal Place of Business

Mailing Address

41 BRISTOL LANE
PALM COAST FL 32137-2509
US

P O BOX 354412
PALM COAST FL 32135-4412
US

3. Date Incorporated or Qualified
04/15/1993

3a. Date of Last Report
02/15/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number
59-3160787

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

City & State

City & State

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

Zip

Country

Zip

Country

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

DEGENNARO, CARLO
41 BRISTOL LANE
PALM COAST FL 32137

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 is required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD ☐ DELETE
NAME DEGENNARO, CARLO
STREET ADDRESS 41 BRISTOL LANE
CITY-ST-ZIP PALM COAST FL

11 TITLE D ☐ Change ☒ Addition
12 NAME BERTHA DEIRNE
13 STREET ADDRESS 11 COCHISE COURT
14 CITY-ST-ZIP PALM COAST FL 32137

TITLE VD ☐ DELETE
NAME MCDONALD, ELIZABETH A
STREET ADDRESS 24 PANORAMA DRIVE
CITY-ST-ZIP PALM COAST FL

21 TITLE SD ☐ Change ☒ Addition
22 NAME JACQUELINE BERRIOS
23 STREET ADDRESS 60 BEACHWAY DRIVE
24 CITY-ST-ZIP PALM COAST FL 32137-8655

TITLE SD ☐ DELETE
NAME LIBBY, IRENE
STREET ADDRESS 11 CHERRY COURT
CITY-ST-ZIP PALM COAST FL

31 TITLE D ☐ Change ☒ Addition
32 NAME CAROL FABBRINI
33 STREET ADDRESS 15 BLAIR CASTLE DRIVE
34 CITY-ST-ZIP PALM COAST FL 32137

TITLE TD ☐ DELETE
NAME KULPA, CORAL
STREET ADDRESS 111 BEECHWOOD LANE
CITY-ST-ZIP PALM COAST FL

41 TITLE D ☐ Change ☒ Addition
42 NAME STELLA FINAN
43 STREET ADDRESS 3510 S. OCEANSHORE BLVD
44 CITY-ST-ZIP FLAGLER BEACH FL 32136

TITLE D ☐ DELETE
NAME ALLEN, JAMES
STREET ADDRESS 39 FARRINGTON LANE
CITY-ST-ZIP PALM COAST FL

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

TITLE D ☒ DELETE
NAME PANDOLAS, EUGENE
STREET ADDRESS 9 FORDNEY LANE
CITY-ST-ZIP PALM COAST FL

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

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 199.07(3)(k), 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:

Carlo D. De Gennaro
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
CARLO D. DE GENNARO

5.21.96

(904) 446-0308
Daytime Phone #

CR2E037 (12/95)