

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAY -1 AM 9:18

DOCUMENT # N94000003966 (8)

1. Corporation Name

PALMONA PARK CIVIC ASSOCIATION, INC.

Principal Place of Business

Mailing Address

C/O PARKSIDE COMMUNITY
235 STOCKTON STREET
NO. FORT MYERS FL 33903

C/O PARKSIDE COMMUNITY
235 STOCKTON STREET
NO. FORT MYERS FL 33903

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3a. Date of Last Report

08/11/1994

4. FBI Number

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 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip Country

29 Zip Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JACKSON, DOUGLAS E
C/O PARKSIDE COMMUNITY
235 STOCKTON STREET
NO. FORT MYERS FL 33903

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 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

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 * D
NAME CHITTUM, RAY J
STREET ADDRESS 340 CAPITAL STREET
CITY - ST - ZIP NO. FORT MYERS FL 33903

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP
WELCH, JAMES R.
329 MONTEREY STREET
NO. FORT MYERS FL 33903

TITLE D
NAME CAULFIELD, JAN
STREET ADDRESS 241 STATE STREET
CITY - ST - ZIP NO. FORT MYERS FL 33903

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP
VIKE, JEAN
1732 ATLANTIC AVENUE
NO. FORT MYERS FL #33903

TITLE D
NAME WIKE, MARION
STREET ADDRESS 1732 ATLANTIC AVENUE
CITY - ST - ZIP NO. FORT MYERS FL 33903

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP
T WALLS, THELMA M.
245 SACRAMENTO STREET
NO. FORT MYERS FL 33903

TITLE D
NAME HYLTON, MILDRED
STREET ADDRESS 229 STATE STREET
CITY - ST - ZIP NO. FORT MYERS FL 33903

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP
S GREAR, PEGGY A.
257 ELLIS STREET
NO. FORT MYERS FL 33903

TITLE D
NAME WELLS, MICHELLE
STREET ADDRESS 225 SACRAMENTO STREET
CITY - ST - ZIP NO. FORT MYERS FL 33903

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP
D JACKSON, DOUGLAS E.
235 STOCKTON STREET
NO. FORT MYERS FL 33903

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 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 119.07(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 jurisdiction.

SIGNATURE:

James R. Welch, President

4/25/95

813-997-5070