

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 21 AM 9:39

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 732519

(4)

1. Corporation Name

PORT MALABAR UNIT 55 PROPERTY OWNERS' ASSOCIATIO
N, INC.

Principal Place of Business

Mailing Address

1101 CRICKET DR., NE
PALM BAY FL 32907

1101 CRICKET DR., NE
PALM BAY FL 32907

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/17/1975

3a. Date of Last Report

04/20/1994

4. FEI Number

59-2030644

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TERRY, ELIZABETH G.
1338 NOLAN STREET, N.E.
PALM BAY FL 32907

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 607.1506, 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 resigning)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME TERRY, ELIZABETH G.
STREET ADDRESS 1338 NOLAN STREET NE
CITY - ST - ZIP PALM BAY FL

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE VD
NAME DACRES, IVAN
STREET ADDRESS 308 EPPING COURT, N.E.
CITY - ST - ZIP PALM BAY FL

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

V. Robert CARTER
335 Embassy Court N.E.
Palm Bay, FL 32907

☒ Change ☐ Addition

TITLE SD
NAME CARMEN, PATRIC
STREET ADDRESS 1248 KNOLLWOOD RD NE
CITY - ST - ZIP PALM BAY FL

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE D
NAME GALBRAITH, CLARA
STREET ADDRESS 487 TEWKSBURY LANE, NE
CITY - ST - ZIP PALM BAY FL

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

☐ Change ☐ Addition

TITLE D
NAME HOLZEMER, DONALD
STREET ADDRESS 1105 LYNDSIDE LN NE
CITY - ST - ZIP PALM BAY FL

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

Ronald

☒ Change ☐ Addition

TITLE TD
NAME CASTLE, RICHARD
STREET ADDRESS 1248 KNOLLWOOD RD NE
CITY - ST - ZIP PALM BAY FL

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

☐ Change ☐ Addition

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 110.07(3)(b), 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:

Elizabeth G. Terry, Pres. & Agent
Elizabeth G. Terry

3/30/95

Date

Daytime Phone #

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