

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 # N94000002139 (3)

1. Corporation Name

EVENTIDE HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business

Mailing Address

4300 BAYOU BLVD.
SUITE 14
PENSACOLA FL 32503

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SUITE 14
PENSACOLA FL 32503

3. Date Incorporated or Qualified
04/27/1994

3a. Date of Last Report
09/28/1995

21 **740 Bayfront Pkwy**
Suite, Apt. #, etc.

26 **PO Box 329**
Suite, Apt. #, etc.

4. FEI Number
59-3241416

Applied For
Not Applicable

22 **3A**
City & State

27 **Pensacola FL**
City & State

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

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

23 **Pensacola FL**
Zip

Country

28 **Pensacola FL**
Zip

Country

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

24 **32501**

25

29 **32592**

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**PRESLEY, EUGENE R
514 DRACENA
GULF BREEZE FL 32561**

81 Name **M Eugene Presley**
82 Street Address (P.O. Box Number is Not Acceptable)
740 Bayfront Parkway
83 **Suite 3A**
84 City **Pensacola** FL 85 Zip Code **32501**

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 *M Eugene Presley*
Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

1-27-96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD	<input type="checkbox"/> DELETE
NAME	HUTCHINS, CHARLES T	
STREET ADDRESS	513 EVENTIDE	
CITY-ST-ZIP	GULF BREEZE FL 32561	
TITLE	VPD	<input type="checkbox"/> DELETE
NAME	VALLIMONT, JANE E	
STREET ADDRESS	2400 TRONJO CIR	
CITY-ST-ZIP	PENSACOLA FL 32503	
TITLE	ST	<input type="checkbox"/> DELETE
NAME	PRESLEY, EUGENE C	
STREET ADDRESS	P.O. BOX 329 N/A	
CITY-ST-ZIP	PENSACOLA FL 32503	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
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 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 an address.

SIGNATURE:

M Eugene Presley
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-27-96 (904) 432-7066
Date Daytime Phone #

CR2E037 (12/95)