

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

FILED

Mar 06 1996 8:00 am

Secretary of State

DOCUMENT # 703241 (0)

1. Corporation Name

JAMES E. SCOTT COMMUNITY ASSOCIATION, INCORPORATED

Principal Place of Business

Mailing Address

2389 NW 54TH STREET  
MIAMI FL 33142-2946  
US

2389 NW 54TH STREET  
MIAMI FL 33142-2946  
US



3. Date Incorporated or Qualified

11/21/1961

3a. Date of Last Report

04/04/1995

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

4. FEI Number

59-0711178

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

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

ROLLE, DORRIN D.  
2389 N.W. 54TH STREET  
MIAMI FL 33142

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 required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE VC ☐ DELETE  
NAME ELLIS, GEORGE E., JR.  
STREET ADDRESS 13520 N.W. 17TH AVE.  
CITY-ST-ZIP MIAMI FL

1.1 TITLE VC/D ☒ Change ☐ Addition  
1.2 NAME Ellis, George, Jr.  
1.3 STREET ADDRESS 13520 N.W. 17th Avenue  
1.4 CITY-ST-ZIP Miami, Florida

TITLE S ☐ DELETE  
NAME WILLINGHAM, MARY J.  
STREET ADDRESS 2948 N.W. 59TH ST.  
CITY-ST-ZIP MIAMI FL

2.1 TITLE S/D ☒ Change ☐ Addition  
2.2 NAME Willingham, Mary J.  
2.3 STREET ADDRESS 2948 N.W. 59th Street  
2.4 CITY-ST-ZIP Miami, Florida

TITLE D ☐ DELETE  
NAME HARRIS, GLENDA G.  
STREET ADDRESS 270 N. W. 120TH STREET  
CITY-ST-ZIP MIAMI FL

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

TITLE D ☐ DELETE  
NAME LAMAR, JAMES E.  
STREET ADDRESS 13121 N. W. 18TH AVENUE  
CITY-ST-ZIP MIAMI FL

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

TITLE CD ☐ DELETE  
NAME HOLLOWAY, WILBERT T  
STREET ADDRESS 150 W. FLAGLER STREET  
CITY-ST-ZIP MIAMI FL

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

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/27/96 (305) 637-1053  
Date Daytime Phone #

CR2E037 (12/95)