FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



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

1996

		ñ e**					
DOCUMENT # 612045 (5)							
NEAL	COMMUNITIES, INC.						
						18 6 010 300 0 413 0 6 140	

Principal Place of Business Mailing Address							
3711 CORTEZ RD., WEST STE. 300			3711 CORTEZ RD., WEST STE, 300				
BRADENTON	I FL 34210	BRADENTON FL 34	1210				
US		US			3. Date Incorporated or Qualified 02/22/1979	3a. Date of Las 04/25/	
2. Principal Place of Business 2a 21		2a. Mailing Address	1		4. FEI Number 59-1893445		Applied For
Suite, Apt. #, etc.			Suite, Apt. #, etc.			\$8	Not Applicable 75 Additional
22		27			5. Certificate of Status Desired	1 1	e Required
City & State		City & State	1 · ·		6. Election Campaign Financing	\$5	.00 May Be
23 Zip	20 2		Zip Country		Trust Fund Contribution		ded to Fees
24	Country 25	Zip	30	try	8. This corporation has liability for Florida Statutes	r intangible tax unde s □ No	s 199.032,
	9. Name and Address of Curr]50]		10. Name and Address of New		
	Paris Make. Make.		1	Name			
	MER, THOMASINE		ļ.	32 Street Add	ress (P.O. Box Number is Not Accepta	(ble)	
3711 CORTEZ RD., WEST							
STE. 300 Bradenton Fl. 34210				33			
DRADER	NION FL 34210		-	34 City		p 85	Zip Code
11. Pursuant t	to the provisions of Sections 607.05	02 ann 607 1508. Florida Sta	dutes the show	a named cours	ration submits this statement for the pr	FL "	o registered office
or register	ed agent, or both, in the State of Flo th, and accept the obligations of, Se	rida. Such change was auth	orized by the co	rporation's boa	rd of directors. Thereby accept the ap	popuse of changing foointment as register	ed agent. I am
			nes.				
SIGNATURE _	Signature, typed or printed mene of registered age	int and tide if accricable	(NOTE: Registered A	gent signature require	d when reinstating)	DATE	
	OF HOLINS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OF		
TITLE	SCHIER, JAMES R.		1. 1 717			☐ Chang	e
NAME STREET ADDRESS	3711 CORTEZ RD., WEST,	STF 300	1.2 NAA				
CITY-ST-ZIP	BRADENTON FL	012. 000		EFT ADDRESS - ST- ZIP			
TITLE	\$D	☐ DELETE	2 1 11			[Chang	e
NAME	BLACKMER, THOMASINE		2 2 NAN	NE .			
STREET ADDRESS				ET ADDRESS			
CITY-ST-ZIP	BRADENTON FL		2 4 CIT	- S1 - ZIP			
TITLE	VASD (32 DECEY		3. 1 TIT		VASD	- 🔲 Chang	e 🔲 Addition
NAME	CHRIST, PEGGY	STE 200	3.2 NAM		St.John, Valerie		
STREET ADDRESS	DDADCHTON CI				3711 Cortez Rd.W	.,Ste.300	
CITY-ST-ZIP TITLE	V	☐ DELFTE	3.4 CIT 4. 1 TIT		Bradenton, FL	Chang	e 🗍 Addition
NAME	SOCHAR, MARK		4. 1 IIII 4.2 NAA			["] cuant	e Manualian
STREET ADDRESS	3711 CORTEZ RD., WEST,	STE. 300		ET ADDRESS			
CITY-ST-ZIP	BRADENTON FL			- ST - 7IP			
TITLE		DELETE	5 1 1(1)		*	Chang	e 🔲 Addition
NAME			5 2 NAM	iE			
STREET ADDRESS			5 3 STR	TET ADDRESS			
CITY - S1 - ZIP		P second		-ST - ZiP			
TITLE		DELETE	6 1 TiTi			Chang	e 🔲 Addition
NAME ATREET ADDRESS			6 2 NAV				
STREET ADDRESS				ET ADDRESS			
CITY-S1-ZIP	porting that the later retire as per la	Trackle this files in a case and it.		- ST-ZIP			

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 607, Florida Statutes; and that my name appears in Block 12 of Block 13 if changed, or on an attachment with an address.

SIGNATURE: The Manue Polarimer Thomasine Blackmer

4/22/96 941/756-0677