

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 10, 2006 8:00 am
Secretary of State

02-10-2006 90015 027 ****61.25

DOCUMENT # 705248

1. Entity Name
BEVERLY HILLS CIVIC ASSOCIATION, INC.



Principal Place of Business
**ONE CIVIC CIRCLE
BEVERLY HILLS, FL 34465 US**

Mailing Address
**ONE CIVIC CIRCLE
BEVERLY HILLS, FL 34465 US**

60013698



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

01092006 Chg-NP CR2E037 (11/05)

City & State

City & State

4. FEI Number
51-0217168

Applied For
Not Applicable

Zip

Country

Zip

Country

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

6. Name and Address of Current Registered Agent

7. Name and Address of New Registered Agent

**VOLLMER, ANTHONY (VOLLMER)
4124 N. DAVIS ST.
BEVERLY HILLS, FL 34465**

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE *Anthony D. Vollmer*
Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

1-30-06
DATE

**Filing Fee is \$61.25
Due by May 1, 2006**

9. Election Campaign Financing
Trust Fund Contribution. ☐

**\$5.00 May Be
Added to Fees**

**Make check payable to
Florida Department of State**

10. OFFICERS AND DIRECTORS

TITLE **2V** ☐ Delete
NAME **PETERSON, IRVIN L**
STREET ADDRESS **882 W. COLBERT DR**
CITY-ST-ZIP **BEVERLY HILLS, FL 34465**

TITLE **T** ☐ Delete
NAME **VOLLMER, ANTHONY D**
STREET ADDRESS **4124 N. DAVIS ST.**
CITY-ST-ZIP **BEVERLY HILLS, FL 344653290**

TITLE **D** ☐ Delete
NAME **COLBERT, MICHAEL**
STREET ADDRESS **4759 W. CRESTLINE DR**
CITY-ST-ZIP **BEVERLY HILLS, FL 34465**

TITLE **D** ☐ Delete
NAME **QUINTAS, JOHN**
STREET ADDRESS **4246 N MAE WEST WAY**
CITY-ST-ZIP **BEVERLY HILLS, FL 34465**

TITLE **D** ☐ Delete
NAME **GONZALEZ, VINCENT**
STREET ADDRESS **311 S. PILLMORE ST.**
CITY-ST-ZIP **BEVERLY HILLS, FL 34465**

TITLE **P** ☒ Delete
NAME **ERICANO, JANE T**
STREET ADDRESS **560 W SAND OAK COURT**
CITY-ST-ZIP **BEVERLY HILLS, FL 34465**

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE **P** ☐ Change ☒ Addition
NAME **Fred Hale**
STREET ADDRESS **84 Roosevelt Blvd**
CITY-ST-ZIP **Beverly Hills Fl 34465**

TITLE **1V** ☐ Change ☒ Addition
NAME **Diane Gaughan**
STREET ADDRESS **99 S. Osceola St**
CITY-ST-ZIP **Beverly Hills FL 34465**

TITLE ☐ Change ☐ Addition
NAME ☐ Change ☐ Addition
STREET ADDRESS ☐ Change ☐ Addition
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition
NAME ☐ Change ☐ Addition
STREET ADDRESS ☐ Change ☐ Addition
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition
NAME ☐ Change ☐ Addition
STREET ADDRESS ☐ Change ☐ Addition
CITY-ST-ZIP ☐ Change ☐ Addition

TITLE ☐ Change ☐ Addition
NAME ☐ Change ☐ Addition
STREET ADDRESS ☐ Change ☐ Addition
CITY-ST-ZIP ☐ Change ☐ Addition

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: *Anthony D. Vollmer*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-30-06 *352-746-6765*
Date Daytime Phone #