


FILE NOW: FILING FEE IS \$61.25

FILED

Jan 30 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **714907** (3)  
1. Corporation Name  
**BIG PINE KEY CIVIC ASSOCIATION, INC.**



Principal Place of Business U.S. HWY 1 BIG PINE KEY FL 33043-0190 US	Mailing Address P.O. BOX 430190 BIG PINE KEY FL 33043-0190 US
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3. Date Incorporated or Qualified <b>07/08/1968</b>
4. FEI Number <b>59-2079108</b>
Applied For <input type="checkbox"/>
Not Applicable <input type="checkbox"/>

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent <b>SHINKEVICH, EUGENE 1206 W. SHORE DR. BIG PINE KEY FL 33043</b>
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10. Name and Address of New Registered Agent 81 Name <b>SCHNEIDER, ROBERT E.</b> 82 Street Address (P.O. Box Number is Not Acceptable) <b>3841 DONNA ROAD</b> 83 84 City <b>BIG PINE KEY</b> FL 85 Zip Code <b>33043-6411</b>
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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 Robert E. Schneider - President DATE 01/12/98  
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE P	<input type="checkbox"/> DELETE NAME SCHNEIDER, ROBERT E STREET ADDRESS 3841 DONNA ROAD CITY-ST-ZIP BIG PINE KEY FL <del>11</del>	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 33043	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE 1-VD	<input checked="" type="checkbox"/> DELETE NAME GRIMES, BILL STREET ADDRESS P.O. BOX 1322 N/A CITY-ST-ZIP BIG PINE KEY FL 33043	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP VD WISNOSKI, STANLEY 29570 SARATOGA AVE. BIG PINE KEY FL 33043	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE 2-VD	<input checked="" type="checkbox"/> DELETE NAME JESSUP, WAYNE STREET ADDRESS P.O. BOX 431618 N/A CITY-ST-ZIP BIG PINE KEY FL	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP D SHINKEVICH, EUGENE 1206 WEST SHORE DRIVE BIG PINE KEY FL 33043	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE S	<input checked="" type="checkbox"/> DELETE NAME DAY, PAT STREET ADDRESS 29044 BEGONIA DRIVE CITY-ST-ZIP BIG PINE KEY FL 47	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP SD BOLTON, JOAN 3848 DONNA ROAD BIG PINE KEY FL 33043	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
TITLE S	<input type="checkbox"/> DELETE NAME CLOSER, DAYTON STREET ADDRESS 29311 OLEANDER DR. CITY-ST-ZIP BIG PINE KEY FL <del>80</del>	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP SD BIG PINE KEY FL 33043	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
TITLE TD	<input type="checkbox"/> DELETE NAME SCHNEIDER, BRENDA STREET ADDRESS 3841 DONNA REED CITY-ST-ZIP BIG PINE KEY FL	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP 3841 DONNA ROAD BIG PINE KEY FL 33043	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Robert E. Schneider REQUIRED DATE 01/12/98 (305) 872-3509

CR2E037 (10/97)