

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

APPROVED
AND
FILED

96 MAY -1 PM 5:59

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # 718552 (3)

1. Corporation Name

MAINLANDS SECTION FOUR CIVIC AND RECREATION ASSO
CIATION, INC.

Principal Place of Business

4630 NORTHWEST 46TH STREET
TAMARAC FL 33319

Mailing Address

4630 NORTHWEST 46TH STREET
TAMARAC FL 33319

3. Date Incorporated or Qualified
05/19/1970

3a. Date of Last Report
06/20/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-1430122

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

GEBELL, ANTHONY
4637 N.W. 45TH CT.
TAMARAC FL 33319

81 Name

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

200001823852

83

-05/16/96--01016--003

84 City

*****61.25 *****61.25

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 fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

11. TITLE ☒ DELETE

P
NAME PACIFICO, NATALE S
STREET ADDRESS 4075 NW 44TH ST.
CITY-ST-ZIP TAMARAC FL 33319

11. TITLE ☒ DELETE

VD
NAME GEBELL, ANTHONY
STREET ADDRESS 4637 NW 45TH CT.
CITY-ST-ZIP TAMARAC FL 33319

11. TITLE ☒ DELETE

S
NAME LA FAYETTE, DORIS
STREET ADDRESS 4513 NW 47TH TER
CITY-ST-ZIP TAMARAC FL

11. TITLE ☒ DELETE

T
NAME COOK, BEVERLY D.
STREET ADDRESS 4636 N.W. 45TH CT.
CITY-ST-ZIP TAMARAC FL 33319

11. TITLE ☒ DELETE

V
NAME GORTON, THOMAS
STREET ADDRESS 4638 NW 45TH CT
CITY-ST-ZIP TAMARAC FL 33319

11. TITLE ☒ DELETE

SC
NAME RUTH REILAND
STREET ADDRESS 4709 N.W. 48TH AVENUE
CITY-ST-ZIP TAMARAC FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11. TITLE ☒ Change ☐ Addition

Pres
Name Gebell, Anthony
STREET ADDRESS 4637 NW 45th CT
CITY-ST-ZIP Tamarac FL 33319

11. TITLE ☒ Change ☐ Addition

V. Pres
Name Bonnie Mc Guire
STREET ADDRESS 4706 N.W. 48th Ave
CITY-ST-ZIP Tamarac FL 33319

11. TITLE ☒ Change ☐ Addition

Director
Name LA FAYETTE, DORIS
STREET ADDRESS 4513 NW 47th Ter.
CITY-ST-ZIP Tamarac FL 33319

11. TITLE ☐ Change ☐ Addition

Treasurer
Name Cook, Beverly D.
STREET ADDRESS 4636 N.W. 45th CT
CITY-ST-ZIP Tamarac FL 33319

11. TITLE ☒ Change ☐ Addition

V. Pres.
Name Paul Murphy
STREET ADDRESS 4516 NW 45th Ter.
CITY-ST-ZIP Tamarac FL 33319

11. TITLE ☐ Change ☐ Addition

S.C.
Name Rita Gabeck
STREET ADDRESS 4904 N. 48th Ave
CITY-ST-ZIP Tamarac FL 33319

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

Date

Daytime Phone #

CR2E037 (12/95)