

2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Jul 20, 2006 08:00 AM
Secretary of State

DOCUMENT # 719158

1. Entity Name

THE INVERNESS HIGHLANDS SOUTH AND WEST CIVIC
ASSOCIATION, INCORPORATED



Principal Place of Business

4375 S. LITTLE AL POINT
P O BOX 1261
INVERNESS FL 34452
US

Mailing Address

P O BOX 1261
INVERNESS FL 34451-1261
US



2. Principal Place of Business

3. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

2nd MOORE

CR2E037 (4/06)

4. FEI Number

59-6556811

Applied For

Not Applicable

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

WINBURN, PAUL
6389 E WINGATE ST
INVERNESS FL 34452

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

FILE NOW: FEE IS \$61.25
Due By September 6, 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 S ☐ Delete
NAME HIMPELE, FRANCES
STREET ADDRESS 6262 E MALVERNE ST
CITY - ST - ZIP INVERNESS FL

TITLE P ☐ Delete
NAME WINBURN, PAUL
STREET ADDRESS 6389 E WINGATE STREET
CITY - ST - ZIP INVERNESS FL 34452

TITLE V ☐ Delete
NAME HANSEN, KARL
STREET ADDRESS 6151 E TREMONT ST
CITY - ST - ZIP INVERNESS FL 34452

TITLE T ☐ Delete
NAME FORGIONE, JOY
STREET ADDRESS 6036 E. TREMONT ST
CITY - ST - ZIP INVERNESS FL 34452

TITLE V ☐ Delete
NAME CLOWARD, PAT
STREET ADDRESS 5189 ROBERT BLAKE
CITY - ST - ZIP INVERNESS FL 34452

TITLE ☐ Delete
NAME
STREET ADDRESS
CITY - ST - ZIP

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE ☐ Change ☐ Addition
NAME
STREET ADDRESS
CITY - ST - ZIP
U00000571354
07/20/06-80004-005 61.25

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

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CITY - ST - ZIP

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:

Joy Forgione Joy FORGIONE 7/18/06