

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

DOCUMENT # 726019 (3)
1. Corporation Name
SAN CLEMENTE EAST CIVIC ASSOCIATION, INCORPORATE
D



Principal Place of Business Mailing Address
6909 TIERRA VERDE 6909 TIERRA VERDE
PORT RICHEY FL. 34668 PORT RICHEY FL. 34668

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Zip
24 Country 29 Country 30

3. Date Incorporated or Qualified 04/06/1973 3a. Date of Last Report 04/19/1995
4. FEI Number 23-7332375 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

LOVING, ERNESTINE D.
6911 EL CAMINO PALOMA
PORT RICHEY FL 34668

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City 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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE NAME STREET ADDRESS CITY-ST-ZIP
1. ☐ DELETE
MURPHY, MARY
6841 TIERRA VERDE
PORT RICHEY FL
2. ☐ DELETE
SWEENEY, HAZEL
6908 ALTA VISTA
PORT RICHEY FL
3. ☒ DELETE
NATHANSON, HAROLD
6810 ALTAVISTA ST.
PORT RICHEY FL
4. ☐ DELETE
LOVING, ERNESTINE
6911 EL CAMINO PALOMA
PORT RICHEY FL
5. ☐ DELETE
MISKOWITZ, GEORGE
6924 TIERRA LINDA
PORT RICHEY FL
6. ☐ DELETE
SCHEER, JOHN J.
6820 TIERRA LINDA ST.
PORT ST. RICHEY FL

1.1 TITLE DIRECTOR ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
2.1 TITLE SECRETARY ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE DIRECTOR ☐ Change ☒ Addition
3.2 NAME BARBARA VOGLER
3.3 STREET ADDRESS 6900 TIERRA VERDE
3.4 CITY-ST-ZIP PORT RICHEY, FL 34668
4.1 TITLE 1 VICE PRESIDENT ☒ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE TREASURER ☐ Change ☒ Addition
5.2 NAME ROGER E. SMITH
5.3 STREET ADDRESS 1415 AMARILLO STREET
5.4 CITY-ST-ZIP PORT RICHEY, FL 34668
6.1 TITLE FINANCIAL SECRETARY ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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)