

**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 # **728530** (7)  
1. Corporation Name  
**COACHMAN LAKES ESTATES ASSOCIATION, INC.**



Principal Place of Business  
**2341 CAMPBELL RD.  
CLEARWATER FL 34625  
US**

Mailing Address  
**2341 CAMPBELL RD.  
CLEARWATER FL 34625  
US**

3. Date Incorporated or Qualified  
**12/31/1973**

3a. Date of Last Report  
**03/24/1995**

4. FEI Number  
**59-3177081**

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

2. Principal Place of Business

21  
Suite, Apt. #, etc.

22  
City & State

23  
Zip

24  
Country

25  
Country

26  
Suite, Apt. #, etc.

27  
City & State

28  
Zip

29  
Country

30  
Country

9. Name and Address of Current Registered Agent

**RIEDEL, JAY  
2341 CAMPBELL RD.  
CLEARWATER FL 34625**

10. Name and Address of New Registered Agent

81 Name

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

83

84 City

85 Zip Code

**FL**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>P</b>	1.1 TITLE	<b>P</b>
NAME	<b>RIEDEL, JAY</b>	1.2 NAME	<b>DAN MCCANN</b>
STREET ADDRESS	<b>2341 CAMPBELL RD</b>	1.3 STREET ADDRESS	<b>1872 MCCAULEY RD</b>
CITY-ST-ZIP	<b>CLEARWATER FL</b>	1.4 CITY-ST-ZIP	<b>CLEARWATER, FL 34625</b>
TITLE	<b>V</b>	2.1 TITLE	<b>V</b>
NAME	<b>YOUNG, PAUL</b>	2.2 NAME	<b>PAULINE DEAL</b>
STREET ADDRESS	<b>2301 CAMPBELL RD</b>	2.3 STREET ADDRESS	<b>2300 CAMPBELL RD</b>
CITY-ST-ZIP	<b>CLEARWATER FL</b>	2.4 CITY-ST-ZIP	<b>CLEARWATER, FL 34625</b>
TITLE	<b>S</b>	3.1 TITLE	<b>S</b>
NAME	<b>SCHWAB, ROGER</b>	3.2 NAME	<b>CHRISTOPHER SKIBICKI</b>
STREET ADDRESS	<b>1830 MCCAULEY RD</b>	3.3 STREET ADDRESS	<b>2327 CAMPBELL RD</b>
CITY-ST-ZIP	<b>CLEARWATER FL</b>	3.4 CITY-ST-ZIP	<b>CLEARWATER, FL 34625</b>
TITLE	<b>D</b>	4.1 TITLE	<b>T</b>
NAME	<b>MCCANN, DAN</b>	4.2 NAME	<b>JAY RIEDEL</b>
STREET ADDRESS	<b>1865 JESSICA RD</b>	4.3 STREET ADDRESS	<b>2341 CAMPBELL RD</b>
CITY-ST-ZIP	<b>CLEARWATER FL</b>	4.4 CITY-ST-ZIP	<b>CLEARWATER, FL 34625</b>
TITLE	<b>T</b>	5.1 TITLE	<b>D</b>
NAME	<b>KELLY, PAT</b>	5.2 NAME	<b>SCOTT BAKER</b>
STREET ADDRESS	<b>1872 MCCAULEY ROAD</b>	5.3 STREET ADDRESS	<b>1825 JESSICA RD</b>
CITY-ST-ZIP	<b>CLEARWATER FL</b>	5.4 CITY-ST-ZIP	<b>CLEARWATER, FL 34625</b>
TITLE	<b>D</b>	6.1 TITLE	
NAME	<b>LLOYD, JOANNE</b>	6.2 NAME	
STREET ADDRESS	<b>1784 MCCAULEY RD.</b>	6.3 STREET ADDRESS	
CITY-ST-ZIP	<b>CLEARWATER FL</b>	6.4 CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **P**  Change  Addition

1.2 NAME **DAN MCCANN**

1.3 STREET ADDRESS **1872 MCCAULEY RD**

1.4 CITY-ST-ZIP **CLEARWATER, FL 34625**

2.1 TITLE **V**  Change  Addition

2.2 NAME **PAULINE DEAL**

2.3 STREET ADDRESS **2300 CAMPBELL RD**

2.4 CITY-ST-ZIP **CLEARWATER, FL 34625**

3.1 TITLE **S**  Change  Addition

3.2 NAME **CHRISTOPHER SKIBICKI**

3.3 STREET ADDRESS **2327 CAMPBELL RD**

3.4 CITY-ST-ZIP **CLEARWATER, FL 34625**

4.1 TITLE **T**  Change  Addition

4.2 NAME **JAY RIEDEL**

4.3 STREET ADDRESS **2341 CAMPBELL RD**

4.4 CITY-ST-ZIP **CLEARWATER, FL 34625**

5.1 TITLE **D**  Change  Addition

5.2 NAME **SCOTT BAKER**

5.3 STREET ADDRESS **1825 JESSICA RD**

5.4 CITY-ST-ZIP **CLEARWATER, FL 34625**

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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-03/28/96--01110--020  
\*\*\*61.25

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: Jay Riedel (JAY RIEDEL) 3/12/96 813-786-8300  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (12/95)