

**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 # 739292 (1)

1. Corporation Name  
**BCARC HOMES, INC.**



Principal Place of Business: 951 EYSTER BLVD, ROCKLEDGE FL 32955  
Mailing Address: 1694 CEDAR ST, ROCKLEDGE FL 32955, US

3. Date Incorporated or Qualified: 06/08/1977  
3a. Date of Last Report: 04/03/1995

21	2. Principal Place of Business	26	2a. Mailing Address	4.	FEI Number	Applied For
	Suite, Apt. #, etc.		Suite, Apt. #, etc.		59-2193020	Not Applicable
22	City & State	27	City & State	5.	Certificate of Status Desired	\$8.75 Additional Fee Required
	Zip	28	City & State		<input type="checkbox"/>	
24	Country	29	Country	6.	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
		30			<input type="checkbox"/>	
				8.	This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent

DRESSLER, JAMES R.  
110 DIXIE LANE  
COCOA BEACH FL 32931

10. Name and Address of New Registered Agent

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	D LAIBL, JAMES C JR. 3500 N. SYLVAN LANE MELBOURNE FL	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	T BRUNS, PAUL 3165 N. ATLANTIC AVENUE, R.H., #4 COCOA BEACH FL	2.1 TITLE	Change <input checked="" type="checkbox"/> Addition
NAME		2.2 NAME	Swift, Barry
STREET ADDRESS		2.3 STREET ADDRESS	201 Barton Blvd
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Rockledge, FL 32955
TITLE	D OSBORNE, MAC 300 DELANNOY AVENUE COCOA FL	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		3.2 NAME	
STREET ADDRESS		3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	S RUSSELL, ELIZABETH 525 INDIAN RVR AVE, #302 TITUSVILLE FL	4.1 TITLE	Change <input type="checkbox"/> Addition <input checked="" type="checkbox"/>
NAME		4.2 NAME	Fetrow Brenda
STREET ADDRESS		4.3 STREET ADDRESS	6745 Hartford Rd.
CITY-ST-ZIP		4.4 CITY-ST-ZIP	Cocoa, FL 32927
TITLE	PD SCHWEINSBERG, JOHN R. JR. 850 BELHURST LN ROCKLEDGE FL	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	D SANSOM, DIXIE 110 BARTON AVENUE ROCKLEDGE FL	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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

*Sandra B. Mortham*

4-17-96

Date

407-690-3464

Daytime Phone

827 300

CR2E037 (12/95)