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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

CORPORATION ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **748289** **(6)**

1. Corporation Name

BELLEVIEW PARKVIEW PLAYERS, INC.

Principal Place of Business	Mailing Address
P.O. BOX 1646 BELLEVIEW FL 32620-3165	P.O. BOX 1646 BELLEVIEW FL 32620-3165

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/31/1979
3a. Date of Last Report: 04/28/1994
4. FEI Number: 59-3034963 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☑ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☑ No

2. Principal Place of Business
21: 13131 CR 464 316
22: Suite, Apt. #, etc.
23: City & State: FT MC
24: Zip: 32134 25: County: Marion

2a. Mailing Address
26: P.O. Box 1646
27: Suite, Apt. #, etc.
28: City & State: Belleview Florida
29: Zip: 34421 30: County: Marion

9. Name and Address of Current Registered Agent

PHILLIPS, CECILIA A.
12352 SE 89 E
BELLEVIEW FL 34421

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: Cecilia A Phillips — Cecilia A Phillips — 4-24-95
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	P	11 TITLE	President D (Same)	☐ Change ☐ Addition
NAME	PHILLIPS, CECILIA A.	12 NAME	Cecilia Phillips	
STREET ADDRESS	12352 SE 89 PL	13 STREET ADDRESS	12352 SE 89 Terr	
CITY-ST-ZIP	BELLEVIEW FL	14 CITY-ST-ZIP	Belleview Fl	
TITLE	VP	21 TITLE	Vice President D	☒ Change ☐ Addition
NAME	LOFTUS, STEVE	22 NAME	Shirley Seaman	
STREET ADDRESS	9255 SE 109TH LANE	23 STREET ADDRESS	9701 S.E. C-25 Lot #16	
CITY-ST-ZIP	BELLEVIEW FL	24 CITY-ST-ZIP	Belleview Fl. 34420	
TITLE	TD	31 TITLE	Cheryl D. Mitchell D	☒ Change ☐ Addition
NAME	FLORNTINO, CANDY	32 NAME		
STREET ADDRESS	10185 SE 149TH LN	33 STREET ADDRESS	5360 SE 22ND PL	
CITY-ST-ZIP	SUMMERFIELD FL	34 CITY-ST-ZIP	Ocala, FL 34471	
TITLE	SD	41 TITLE	Secretary	☒ Change ☐ Addition
NAME	MICHKIN, MIKE	42 NAME	Eileen K Vogel	
STREET ADDRESS	2405 E. 18 CIR	43 STREET ADDRESS	9701 SE C-25-116	
CITY-ST-ZIP	OCALA FL	44 CITY-ST-ZIP	Belleview Fl. 34420	
TITLE		51 TITLE		☐ Change ☐ Addition
NAME		52 NAME		
STREET ADDRESS		53 STREET ADDRESS		
CITY-ST-ZIP		54 CITY-ST-ZIP		
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY-ST-ZIP		64 CITY-ST-ZIP		

REMITTED BY EMAIL

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)(i), 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: Cecilia A Phillips — Cecilia A Phillips — 4/24/95 — 904-245-0911
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0004550