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 # **752157** **(8)**

1. Corporation Name

VICTORIA PARK CIVIC ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1217 N.E. 2ND STREET FORT LAUDERDALE FL 33301	1217 N.E. 2ND STREET FORT LAUDERDALE FL 33301

3. Date Incorporated or Qualified: **04/23/1980**

3a. Date of Last Report: **04/21/1995**

4. FEI Number: **59-2102212** ☐ 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	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

9. Name and Address of Current Registered Agent

BREGARTNER,LINDA H.
1217 N.E. 2ND STREET
FT. LAUDERDALE FL 33301

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 _____ DATE _____
Signature, type or printed name of registered agent and the date of this filing. (NOTE: Registered Agent's signature required when changing)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS		
TITLE	P	☒ DELETE	11 TITLE	P	☒ Change ☐ Addition
NAME	RECCHI, LOU		12 NAME	Cindy Eden	
STREET ADDRESS	1632 NE 7TH ST		13 STREET ADDRESS	520 N Victoria Park Rd	
CITY-ST-ZIP	FT. LAUDERDALE FL		14 CITY-ST-ZIP	Ft Lauderdale FL 33301	
TITLE	V	☐ DELETE	21 TITLE		☐ Change ☐ Addition
NAME	RUDE, JOHN		22 NAME		
STREET ADDRESS	630 NE 14TH AVE		23 STREET ADDRESS		
CITY-ST-ZIP	FT. LAUDERDALE FL		24 CITY-ST-ZIP		
TITLE	T	☒ DELETE	31 TITLE	T	☒ Change ☐ Addition
NAME	LELLAND, JOHN		32 NAME	Robert Crawford	
STREET ADDRESS	605 NE 9TH AVE		33 STREET ADDRESS	524 N Victoria Park Rd	
CITY-ST-ZIP	FT. LAUDERDALE FL		34 CITY-ST-ZIP	Ft Lauderdale FL 33301	
TITLE	D	☒ DELETE	41 TITLE	D	☒ Change ☐ Addition
NAME	LAWRENCE, ELAINE		42 NAME	Dan McKinney	
STREET ADDRESS	549 VICTORIA PARK RD		43 STREET ADDRESS	704 N.E. 15th Avenue	
CITY-ST-ZIP	FT. LAUDERDALE FL		44 CITY-ST-ZIP	Ft Lauderdale FL 33304	
TITLE	D	☒ DELETE	51 TITLE	D	☒ Change ☐ Addition
NAME	ALSTON, VIVIAN		52 NAME	Margo Crawford	
STREET ADDRESS	223 NE 15TH AVE		53 STREET ADDRESS	524 N Victoria Park Rd	
CITY-ST-ZIP	FT LAUDERDALE FL		54 CITY-ST-ZIP	Ft Lauderdale, FL 33301	
TITLE	D	☐ DELETE	61 TITLE		☐ Change ☐ Addition
NAME	ZILONIS, ED		62 NAME		
STREET ADDRESS	605 NE 9TH AVEN		63 STREET ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL		64 CITY-ST-ZIP		

CR2E037 (12/95)

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: Cynthia Eden 4/10/96 305-525-5031
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #