FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

754625

DOCUMENT #	754625	(2)	
EL CONQUISTADOR	NEIGHBORHOOD	ASSOCIATION.	INC.

Delegate at Dia : :	of Dunings	6.6-10 A-11-			100111 10061 6474 01016 01414 11	881 3111 81811 81811 81811 81811 81811 818 11 818 11
Principal Place	of Business	Mailing Address				
4005 AVENIDA BRADENTON		4005 AVENIDA MADERA BRADENTON FL 34210				
					3. Date Incorporated or Qualified 10/13/1980	3a. Date of Last Report 02/21/1995
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number 59-2043095	Applied For Not Applicable
Suite, Apt. :	#, etc.	Suite, Apt. #, etc.	•			\$8.75 Additional
22		27		····	Certificate of Status Desired	Fee Required
· ·	City & State		6. Election Campaign Financing	\$5.00 May Be		
Zip	Country	Zip	Country		Trust Fund Contribution	Added to Fees
24	25		Country		1	r intangible tax under s. 199.032,
	9. Name and Address of Curren		, , , , , , , , , , , , , , , , , , , 		Florida Statutes 10. Name and Address of New	
			81	Name	TO THE STATE OF TH	Trogramme Agent
ROBBINS	S, CHARLES E.					
	ENIDA MADERA		82	Street	Address (P.O. Box Number is Not Accept	able)
	TON FL 34210		83			
			84	City		85 Zip Code
11. Pursuant t	to the provisions of Sections 617.0502	and 617.1508, Florida Statutes,	the above-r	named co	proporation submits this statement for the p	umass of changing its registered office
or register	ed agent, or both, in the State of Floric th, and accept the obligations of, Secti	ia. Such change was authorized i	by the corp	oration's	board of directors. Thereby accept the ap	pointment as régistered agent. I am
SIGNATURE _	Signature, typed or printed name of registered agent	and title if applicable. (NOTE:	Registered Agen	t signature	required when reinstating)	DATE
12.	OFFICERS AND		13.			FICERS AND DIRECTORS IN 12
TITLE	TD	DELETE	1.1 TITLE	C	CHARLES ECK BLOC	
NAME	RICHARDSON, GEORGE		1.2 NAME	1	3500 El Conquista	
STREET ADDRESS	3619 QUAIL HOLLOW PL		1.3 STREET	ADDRESS	3300	7
CITY-ST-ZIP	BRADENTON, FL 00000		1.4 CITY - S		BRADENTON F.	6 34 210
TITLE	PD	DELETE	2.1 TITLE	7	BRADENTON F. Vohn Mabeasaul 431 d St Bradenton M	Change Addition
NAME	ROBBINS, CHARLES		2.2 NAME		John mueagan	
STREET ADDRESS	4005 AVENIDA MADERA		2.3 STREET	ADDRESS	431d ST	•
DiTY-ST-ZIP	BRADENTON, FL 00000		2. 4 DITY-5		Readerday Fd	34210
TITLE	D	DELETE	3.1 TITLE	J1 - E/I	Black France	Change Addition
NAME	HOLLOWAY, EARL		3.2 NAME			
STREET ADDRESS	6408 MEADOWLARK LN		3.3 STREET	ADDRESS		
City-St-Zip	BRADENTON, FL 00000		3.4. CITY - 5			
TITLE	SD	DELETE	4.1 TITLE			☐ Change ☐ Addition
NAME	WITHERS, WILLIAM	_	4. 2 NAME			
STREET ADDRESS	6416 WOOD OWL CIR		4.3 STREET	ADDRESS		
CITY-ST-ZIP	BRADENTON, FL 00000		4.0 DITE-1			
TITLE	D	DELETE	51 TITLE	±"		☐ Change ☐ Addition
NAME	GREENWALD, CAROL		5.2 NAME		1	
STREET ADDRESS	6430 SUN EAGLE LN #205		5.3 STREET	ADDRESS		
CITY-ST-ZIP	BRADENTON FL		54 City-S			
TITLE	VPD	DELETE	61 TITLE	, <u>F</u> ,		☐ Change ☐ Addition
NAME	FIEDLER, JACK	_	62 NAME		İ	
STREET ADDRESS	5915 LA VISTA DR		6 3 STREET	ADDRESS		
CITY - ST - ZIP	BRADENTON FL		6.4 CITY-S			
2117 31 417			■ V.T UILT*3	11.74	ı	

14. Ido 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 cath; 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 3 if changed, or on an attachment with an address.

SIGNATURE: