

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 755172 (4)

1. Corporation Name

PINELLAS CASCADE MOBILE HOME OWNERS CIVIC ASSOCIATION, INC.

Principal Place of Business

CARMELA D'AMICO
7225 - 80TH AVE. N.
PINELLAS PARK FL 34665
US

Mailing Address

CARMELA D'AMICO
725 80TH AVE.
PINELLAS PARK FL 34665
US



3. Date Incorporated or Qualified
11/18/1980

3a. Date of Last Report
01/23/1995

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number
59-2461260

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. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

D'AMICO, CARMELA
7225 - 80TH AVE. N.
PINELLAS PARK FL 34665

10. Name and Address of New Registered Agent

81

Name

Carmela D'Amico

82

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

7225 80th Ave N.

83

84

City

Pinellas Park

FL

85 Zip Code

34665

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

TITLE P ☐ DELETE

NAME MADISON, JEAN S
STREET ADDRESS 7237 - 79TH TERR. N.
CITY - ST - ZIP PINELLAS PARK FL

TITLE DP ☐ DELETE

NAME BAXTER, DALE
STREET ADDRESS 7306 79TH AVE N LOT 208
CITY - ST - ZIP PINELLAS PARK FL

TITLE S ☐ DELETE

NAME BOWER, JUDY
STREET ADDRESS 7943 - 73RD WAY N.
CITY - ST - ZIP PINELLAS PARK FL

TITLE T ☐ DELETE

NAME D'AMICO, CARMELA
STREET ADDRESS 7225 80TH LN. N.
CITY - ST - ZIP PINELLAS PARK FL

TITLE T ☐ DELETE

NAME DOERING, CHRIS
STREET ADDRESS 7945 - 71ST WAY
CITY - ST - ZIP PINELLAS PARK FL

TITLE T ☐ DELETE

NAME FERGUSON, SCOTT
STREET ADDRESS 7328 - 80TH TERR. N.
CITY - ST - ZIP PINELLAS PARK FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

600001731326

03/04/96-01103-001

***70.00

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

Carmela D'Amico 04/27/96 541-6089

CR2E037 (12/95)