

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 # 759332 (0)

1. Corporation Name

FLAGLER BEACH BUSINESS ASSOCIATION, INC.



Principal Place of Business

Mailing Address

P O BOX 1061
FLAGLER BEACH FL 32136-061
US

P. O. BOX 1061
FLAGLER BEACH FL 32136-8061

3. Date Incorporated or Qualified

07/27/1981

3a. Date of Last Report

06/27/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

59-2214951

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LEONARDO, LAURA A
201 S FLAGLER AVE
FLAGLER BEACH FL 32136

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 address at residence

(NOTE: Registered Agent Signature required when not at office)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

D
NAME MAYNARD, CAROLYN J.
STREET ADDRESS 1801 NORTH CENTRAL AVE.
CITY - ST - ZIP FLAGLER BCH FL

TITLE ☐ DELETE

ST
NAME LEONARDO, LAURA A
STREET ADDRESS 201 SOUTH FLAGLER AVE.
CITY - ST - ZIP FLAGLER BEACH FL

TITLE ☒ DELETE

D
NAME KELLY, DENISE
STREET ADDRESS 3600 S A1A, UNIT 423
CITY - ST - ZIP FLAGLER BEACH FL

TITLE ☐ DELETE

VP
NAME BOWLING, B. CARLISLE
STREET ADDRESS 208 MOODY BLVD
CITY - ST - ZIP FLAGLER BEACH FL

TITLE ☐ DELETE

D
NAME GOTTLIEB, JERRY
STREET ADDRESS 340 N 11 ST
CITY - ST - ZIP FLAGLER BEACH FL

TITLE ☐ DELETE

P
NAME LEONARDO, HENRY JR
STREET ADDRESS 201 S FLAGLER AVE
CITY - ST - ZIP FLAGLER BEACH FL

13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

D
NAME Anthony Catoggio
STREET ADDRESS 615 E. Hwy 100
CITY - ST - ZIP Bunnell, FL. 32110

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

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

Date

Signature

Laura A. Leonardo
Laura A. Leonardo 4/29/96 904445-
Sra. Meas.

CR2E037 (12/95)