

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 22, 1999 8:00 am
Secretary of State

03-22-1999 90121 023 ****61.25

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DOCUMENT # 762786

1. Corporation Name

UNITED RESIDENTS OF BEVERLY HILLS, INCORPORATED

Principal Place of Business

C/O WALSH, JOHN
315 S. BARBOUR ST
BEVERLY HILLS FL 34465
US

Mailing Address

PO BOX 640089
BEVERLY HILLS FL 34464
US

250896 - 90121 - 23



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified

04/08/1982

4. FEI Number

NOT APPLICABLE

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

9. Name and Address of Current Registered Agent

REAVES, JEANET
8 ARIZONA STREET
BEVERLY HILLS FL 32665

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS ☐ DELETE

TITLE P
NAME WALSH, JOHN
STREET ADDRESS 315 S BARBOUR ST
CITY-ST-ZIP BEVERLY HILLS FL 34465

TITLE VP ☐ DELETE

NAME MIKUTEL, JOHN
STREET ADDRESS 111 W. GOLDENTUFT CT
CITY-ST-ZIP BEVERLY HILLS FL

TITLE D ☐ DELETE

NAME KLAVANS, WALTER
STREET ADDRESS 412 W BLUEFLAX CT
CITY-ST-ZIP BEVERLY HILLS FL

TITLE T ☐ DELETE

NAME LEE, K. T
STREET ADDRESS 952 W. BEAKRUSH LANE
CITY-ST-ZIP BEVERLY HILLS FL

TITLE S ☐ DELETE

NAME REAVES, JEANET
STREET ADDRESS 8 ARIZONA ST.
CITY-ST-ZIP BEVERLY HILLS FL

TITLE D ☐ DELETE

NAME BAFFUTO, JOHN
STREET ADDRESS 331 S. BARBOUR ST.
CITY-ST-ZIP BEVERLY HILLS 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

14. I hereby certify that the information supplied with this filing 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, with all other like empowered.

SIGNATURE: JEANET REAVES

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/17/99

352-746-6350

Date

Daytime Phone #

CR2E037 (11/98)