

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JAN 24 PM 2:27

DO NOT WRITE IN THIS SPACE.

DOCUMENT # 811808 (5)

1. Corporation Name

BREAKWATER HOMES ASSOCIATION

Principal Place of Business

2621 SE 21ST STREET
FT. LAUDERDALE FL 33316

Mailing Address

2621 SE 21ST STREET
FT. LAUDERDALE FL 33316

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

27 Suite, Apt. #, etc.

28 City & State

29 Zip

30 Country

3. Date Incorporated or Qualified

04/10/1957

3a. Date of Last Report

01/24/1994

4. FBI Number

59-0807093

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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

B1

Name

WILLIAM R. RUPP

B2

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

2190 S.E. 17th STREET #211

B3

B4

City

FT. LAUDERDALE

FL

B5

Zip Code

33316

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when running)

1/17/95

DATE

12. OFFICERS AND DIRECTORS

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1

TITLE

1.2

NAME

1.3

STREET ADDRESS

1.4

CITY - ST - ZIP

2.1

TITLE

2.2

NAME

2.3

STREET ADDRESS

2.4

CITY - ST - ZIP

3.1

TITLE

3.2

NAME

3.3

STREET ADDRESS

3.4

CITY - ST - ZIP

4.1

TITLE

4.2

NAME

4.3

STREET ADDRESS

4.4

CITY - ST - ZIP

5.1

TITLE

5.2

NAME

5.3

STREET ADDRESS

5.4

CITY - ST - ZIP

6.1

TITLE

6.2

NAME

6.3

STREET ADDRESS

6.4

CITY - ST - ZIP

CHARLES "BORDERS"
1521 SE 21ST
FT LAUD 33316

☐ Change ☐ Addition

☐ Change ☐ Addition

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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 007, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Norma McGeehan

NORMA MCGEEHAN

176-ET 305-529-0023

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Title

Signature Number