

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

95 APR 25 AM 7:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **G96694** (6)

1. Corporation Name

ELDORADO VILLAGE RESIDENTS', INC.

Principal Place of Business

**2505 E BAY DRIVE
W DON LUGINBUHL LOT 134
LARGO FL 34641
US**

Mailing Address

**2505 E BAY DRIVE
W DON LUGINBUHL LOT 34
LARGO FL 34641
US**

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified **04/18/1984** 3a. Date of Last Report **04/26/1994**

4. FEI Number **59-2411187** 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

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

9. Name and Address of Current Registered Agent

**FORD, EDWIN I.
2307 W. BAY DRIVE
LARGO FL 33540**

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 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 reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	HAMBLEY, RICHARD
STREET ADDRESS	2505 E. BAY LOT 51
CITY-ST-ZIP	LARGO FL
TITLE	VD
NAME	PRATT, SHIRLEY
STREET ADDRESS	2505 E. BAY LOT 221
CITY-ST-ZIP	LARGO FL
TITLE	SD
NAME	LUGINBUHL, DON
STREET ADDRESS	2505 E BAY DR LOT 134
CITY-ST-ZIP	LARGO FL
TITLE	TD
NAME	MCKEEVER, FRANK
STREET ADDRESS	2505 E BAY LOT 57
CITY-ST-ZIP	LARGO FL
TITLE	D
NAME	FINK, MILLIE
STREET ADDRESS	2505 E BAY DR LOT 45
CITY-ST-ZIP	LARGO FL
TITLE	AD
NAME	JOHNSON, MILT
STREET ADDRESS	2505 E. BAY LOT 42
CITY-ST-ZIP	LARGO FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	☒ Change ☐ Addition
1.2 NAME	MCKEEVER, FRANK	
1.3 STREET ADDRESS	2505 E. BAY DR - LOT 57	
1.4 CITY-ST-ZIP	LARGO, FL	
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	TD	☒ Change ☐ Addition
4.2 NAME	ABRAMS, RALPH	
4.3 STREET ADDRESS	2505 E. BAY DR - LOT 20	
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 110.07(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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Donald W. Ziegler
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/20/95
Date

813-536-0084
Daytime Phone #