

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

PROFIT CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # **H37655 (8)**  
1. Corporation Name  
**BEACON HILL COLONY HOMEOWNERS ASSOCIATION, INC.**



Principal Place of Business  
1112 WEST BEACON RD.  
LOT 125  
LAKELAND FL 33803  
US

Mailing Address  
1112 W. BEACON RD.  
LOT 125  
LAKELAND FL 33803  
US

3. Date Incorporated or Qualified **01/11/1985** 3a. Date of Last Report **01/24/1995**

4. FEI Number **59-1865984** 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

21. Principal Place of Business  
22. State, Apt. #, etc. **Lot 68**  
23. City & State  
24. Zip Country

25. Mailing Address  
26. Suite, Apt. #, etc. **Lot 68**  
27. City & State  
28. Zip Country

9. Name and Address of Current Registered Agent  
**MALPASS, ROBERT M.  
1112 E. BEACON RD.  
125  
LAKELAND FL 33803**

10. Name and Address of New Registered Agent  
81. Name **STEELE, JAMES W.**  
82. Street Address (P.O. Box Number is Not Acceptable) **1112 West Beacon Rd.**  
83. **Lot 68**  
84. City **LAKELAND** 85. Zip Code **FL 33803**

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: *James W. Steele* **James W. STEELE, President** Date: **Feb 1st, 1996**

12. OFFICERS AND DIRECTORS

TITLE	<b>P</b>	<input type="checkbox"/> DELETE
NAME	<b>MALPASS, ROBERT</b>	
STREET ADDRESS	<b>1112 W. BEACON RD., LOT 125</b>	
CITY - ST - ZIP	<b>LAKELAND FL</b>	
TITLE	<b>VP</b>	<input type="checkbox"/> DELETE
NAME	<b>STEELE, JAMES</b>	
STREET ADDRESS	<b>1112 W. BEACON RD., LOT 68</b>	
CITY - ST - ZIP	<b>LAKELAND FL</b>	
TITLE	<b>SD</b>	<input type="checkbox"/> DELETE
NAME	<b>BRAY, BETTY</b>	
STREET ADDRESS	<b>1112 W. BEACON, #199</b>	
CITY - ST - ZIP	<b>LAKELAND FL</b>	
TITLE	<b>T</b>	<input type="checkbox"/> DELETE
NAME	<b>LEETE, GERTRUDE</b>	
STREET ADDRESS	<b>1112 W. BEACON RD., LOT 77</b>	
CITY - ST - ZIP	<b>LAKELAND FL</b>	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY - ST - ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE	<b>P</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	<b>STEELE, JAMES W.</b>	
13 STREET ADDRESS	<b>1112 W. BEACON RD., LOT 68</b>	
14 CITY - ST - ZIP	<b>LAKELAND, FL 33803</b>	
21 TITLE	<b>VP</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	<b>KELLY, VIRGINIA</b>	
23 STREET ADDRESS	<b>1112 W. BEACON RD., LOT 64</b>	
24 CITY - ST - ZIP	<b>LAKELAND, FL 33803</b>	
31 TITLE	<b>SD</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	<b>TOOTHAKER, LAURIE</b>	
33 STREET ADDRESS	<b>1112 W. BEACON RD., LOT 146</b>	
34 CITY - ST - ZIP	<b>LAKELAND, FL 33803</b>	
41 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME		
43 STREET ADDRESS		
44 CITY - ST - ZIP		
51 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME		
53 STREET ADDRESS		
54 CITY - ST - ZIP		
61 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME		
63 STREET ADDRESS		
64 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *James W. Steele* **James W. STEELE, President** Date: **Feb 1/96** (941) 688-0059

CR2E034 (12/95)