MP

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Apr 29 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT **1997**

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

DOCUMENT # **N00529** **(0)**

1. Corporation Name

EAST VILLAGE MASTER ASSOCIATION, INC.

Principal Place of Business	Mailing Address
3000 EAST VILLAGE DRIVE VENICE FL 34293	899 WOODBRIDGE DR. VENICE FL 34293-4313

3. Date Incorporated or Qualified: **12/22/1983**

3a. Date of Last Report: **06/24/1996**

2. Principal Place of Business — 21

2a. Mailing Address — 26

Suite, Apt. #, etc. — 22

Suite, Apt. #, etc. — 27

City & State — 23

City & State — 28

Zip — 24 Country — 25

Zip — 29 Country — 30

4. FEI Number: **59-2434033** ☐ 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

DOUGLAS, JESSICA
ADVANCED MANAGEMENT INC.
899 WOODBRIDGE DR.
VENICE FL 34293

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 Jessica E Douglass-Agent - Jessica E. Douglass 3-25-97
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	T	☐ DELETE	1.1 TITLE	President - D	☑ Change ☐ Addition
NAME	BAXTER, JIM		1.2 NAME	Same	
STREET ADDRESS	1831 KILDEER CT.		1.3 STREET ADDRESS	"	
CITY-ST-ZIP	VENICE FL 34292		1.4 CITY-ST-ZIP	"	
TITLE	T	☐ DELETE	2.1 TITLE	Vice President - D	☑ Change ☐ Addition
NAME	HUTCHINS, CHARLES		2.2 NAME	Same Hutchins, Charles	
STREET ADDRESS	3162 EAST VILLAGE DR.		2.3 STREET ADDRESS	"	
CITY-ST-ZIP	VENICE FL 34292		2.4 CITY-ST-ZIP	"	
TITLE	T	☐ DELETE	3.1 TITLE	Secretary - D	☑ Change ☐ Addition
NAME	BECK, VERA		3.2 NAME	Same Beck, Vera	
STREET ADDRESS	1428 QUAIL LAKE DR.		3.3 STREET ADDRESS	"	
CITY-ST-ZIP	VENICE FL 34292		3.4 CITY-ST-ZIP	"	
TITLE	D	☑ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	LUNDAHL, GLEN		4.2 NAME		
STREET ADDRESS	2232 E VILLAGE CIR.		4.3 STREET ADDRESS		
CITY-ST-ZIP	VENICE FL 34292		4.4 CITY-ST-ZIP		
TITLE	TD	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	LAPIRA, PAUL		5.2 NAME		
STREET ADDRESS	3215 MEADOW RUN DR		5.3 STREET ADDRESS		
CITY-ST-ZIP	VENICE FL		5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

4/1/97

Bank Dep $61.25

CR2E037 (9/96)

14. I do 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.

SIGNATURE: James C. Baxter JR. CHAIRMAN James C Baxter 4/7/97 941-493-0887
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0064750