

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



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

**FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS**

95 FEB 24 AM 11:31

DOCUMENT # NO1296 (5)

1. Corporation Name

C.A.V. HOMEOWNERS COOPERATIVE, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business

39333 BLUE SKYE DRIVE
ZEPHYRHILLS FL 33540

Mailing Address

39333 BLUE SKYE DRIVE
ZEPHYRHILLS FL 33540

3. Date Incorporated or Qualified **02/03/1984**
3a. Date of Last Report **03/14/1994**
4. FEI Number **59-2515418**
Applied For ☐
Not Applicable ☒

2. Principal Place of Business

2a. Mailing Address

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **\$68.75 Supplemental Fee Not Required**

8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

21 **39333 Blue Skye Dr**
Suite, Apt. #, etc.

26 **39333 Blue Skye Dr**
Suite, Apt. #, etc.

22 **Zephyrhills, FL**
City & State

27 **Zephyrhills, FL**
City & State

23 **33540**
Zip Country

28 **33540**
Zip Country

24 **pasco**
25 **pasco**

29 **pasco**
30 **pasco**

9. Name and Address of Current Registered Agent

**DAVIS, MURLE
39234 DONGIAN DR
ZEPHYRHILLS FL 33540**

10. Name and Address of New Registered Agent

81 Name **Vigil Nanton**
82 Street Address (P.O. Box Number is Not Acceptable) **6231 Quality Ln**
83
84 City **Zephyrhills** FL 85 Zip Code **33540**

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

Vigil Nanton

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

(NOTE: Registered Agent Signature required when reappointing)

02-15-95

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	P
NAME	COUPAS, ELEANOR
STREET ADDRESS	8327 BALMY LANE
CITY - ST - ZIP	ZEPHYRHILLS FL
TITLE	VPO
NAME	KECK, WILLIAM
STREET ADDRESS	6420 WAYSIDE LANE
CITY - ST - ZIP	ZEPHYRHILLS FL
TITLE	S
NAME	BARTON, JOAN
STREET ADDRESS	39243 DONGIAN DRIVE
CITY - ST - ZIP	ZEPHYRHILLS FL
TITLE	TD
NAME	DAVIS, MURLE
STREET ADDRESS	39234 DONGIAN DR
CITY - ST - ZIP	ZEPHYRHILLS FL
TITLE	D
NAME	CORBETT, JACK
STREET ADDRESS	6252 PLEASURE LN
CITY - ST - ZIP	ZEPHYRHILLS FL
TITLE	D
NAME	CAMPBELL, ELROY
STREET ADDRESS	6230 WATERFORD LANE
CITY - ST - ZIP	ZEPHYRHILLS FL

1.1 TITLE	President	☒ Change ☐ Addition
1.2 NAME	Nanton, Vigil	
1.3 STREET ADDRESS	6231 Quality Ln	
1.4 CITY - ST - ZIP	Zephyrhills, FL 33540	
2.1 TITLE	Vice-president	☒ Change ☐ Addition
2.2 NAME	Boudreau, Frank	
2.3 STREET ADDRESS	39331 Nanian Dr	
2.4 CITY - ST - ZIP	Zephyrhills, FL 33540	
3.1 TITLE	Secretary	☒ Change ☐ Addition
3.2 NAME	Johnstone, Leeland	
3.3 STREET ADDRESS	6231 Balmy Ln	
3.4 CITY - ST - ZIP	Zephyrhills, FL 33540	
4.1 TITLE	Treasurer	☒ Change ☐ Addition
4.2 NAME	Gellen, Walter	
4.3 STREET ADDRESS	39247 Nahan Dr	
4.4 CITY - ST - ZIP	Zephyrhills, FL 33540	
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE	Director	☒ Change ☐ Addition
6.2 NAME	Nanian, Martin	
6.3 STREET ADDRESS	6311 Wealthy Ln	
6.4 CITY - ST - ZIP	Zephyrhills, FL 33540	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption under Section 607.0504, 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 117, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an affidavit.

SIGNATURE:

Leeland E. Johnstone
SIGNATURE AND TYPED OR PRINTED NAME OF FINANCING OFFICER OR DIRECTOR

Secretary 2/15/95 7826054
Date Daytime Phone