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Jul 30 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N04122** (0)

1. Corporation Name

SETON COURT ASSOCIATION, INC.



Principal Place of Business

Mailing Address

**65 SETON TRAIL #2
ORMOND BEACH FL 32178-6501**

**65 SETON TRAIL #2
ORMOND BEACH FL 32178-6501**

3. Date Incorporated or Qualified
07/11/1984

3a. Date of Last Report
09/20/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number
59-2786139

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

10. Name and Address of New Registered Agent

**RICKARD, ROY
3390 OCBANSHORE BLVD #402
ORMOND BCH FL 32176**

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

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 **TD** ☐ DELETE

NAME **BIDWELL, JOHN**
STREET ADDRESS **65 SETON TRAIL, #2**
CITY-ST-ZIP **ORMOND BEACH FL**

TITLE **PD** ☒ DELETE

NAME **RUTCHER, LEE**
STREET ADDRESS **65 SETON TR., #9**
CITY-ST-ZIP **ORMOND BEACH FL**

TITLE **D** ☐ DELETE

NAME **GREENE, J.**
STREET ADDRESS **65 SETON TRAIL, #10**
CITY-ST-ZIP **ORMOND BCH FL**

TITLE **SD** ☐ DELETE

NAME **DAWSON, B.**
STREET ADDRESS **65 SETON TRAIL, #20**
CITY-ST-ZIP **ORMOND BCH. FL**

TITLE **D** ☐ DELETE

NAME **SNIDER, J.**
STREET ADDRESS **65 SETON TRAIL, #2**
CITY-ST-ZIP **ORMOND BCH FL**

TITLE **VPD** ☒ DELETE

NAME **RICHARD, S.**
STREET ADDRESS **3390 OCEAN SHORE BLVD., #402**
CITY-ST-ZIP **ORMOND BEACH FL**

1.1 TITLE **UPD** ☐ Change ☒ Addition

1.2 NAME **Smith Judy**
1.3 STREET ADDRESS **65 seton TR #11**
1.4 CITY-ST-ZIP **ORMOND Bch FL 32176**

2.1 TITLE **Res Agent - D** ☐ Change ☒ Addition

2.2 NAME **R. Rickard**
2.3 STREET ADDRESS **3390 OCEANSHORE Blvd #402**
2.4 CITY-ST-ZIP **ORMOND Bch FL 32176**

3.1 TITLE **D** ☒ Change ☐ Addition

3.2 NAME **S. Rickard**
3.3 STREET ADDRESS **3390 Ocean Shore Blvd #402**
3.4 CITY-ST-ZIP **ORMOND Bch FL 32176**

4.1 TITLE **PD** ☒ Change ☐ Addition

4.2 NAME **Butcher Lee**
4.3 STREET ADDRESS **65 seton TR #9**
4.4 CITY-ST-ZIP **ORMOND Bch FL 32176**

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 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.

CR2E037 (9/96)