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

APPROVED AND FILED

[illegible] AM 8:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N06482** **(6)**

1. Corporation Name

PERICO BAY VILLAGE ASSOCIATION, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
5917 MANATEE AVE. W. SUITE 609 BRADENTON FL 34209 US	5917 MANATEE AVE. W. SUITE 609 BRADENTON FL 34209 US

3. Date Incorporated or Qualified: 12/05/1984
3a. Date of Last Report: 04/13/1994
4. FEI Number: 59-2567356 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 2055 Wood St.	26 2055 Wood St.
Suite, Apt. #, etc 22 Suite 202	Suite, Apt. #, etc 27 Suite 202
City & State 23 Sarasota FL	City & State 28 Sarasota FL
Zip / Country 24 34237 / 25 USA	Zip / Country 29 34237 / 30 USA

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 § 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
CONSULTANTS MANAGEMENT GROUP, INC. 5917 MANATEE AVE., W. SUITE 609 BRADENTON FL 34209	81 Name: Property & Accounting Management, Inc. 82 Street Address (P.O. Box Number is Not Acceptable): 2055 Wood Street 83: Suite 202 84 City: Sarasota FL 85 Zip Code: 34237

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: _____ 4/10/95
Signature, type or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when necessary) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	TD	11 TITLE		☐ Change ☐ Addition
NAME	NORMAN, NANCY	12 NAME		
STREET ADDRESS	704 ESTUARY DR.	13 STREET ADDRESS		
CITY ST ZIP	BRADENTON FL	14 CITY ST ZIP		
TITLE	PD	21 TITLE		☐ Change ☐ Addition
NAME	STANLEY, RUSSELL	22 NAME		
STREET ADDRESS	621 ESTUARY DR.	23 STREET ADDRESS		
CITY ST ZIP	BRADENTON FL	24 CITY ST ZIP		
TITLE	VD	31 TITLE	VD	☐ Change ☒ Addition
NAME	LEARY, ANN	32 NAME	Ohme, Alice	
STREET ADDRESS	612 ESTUARY DR.	33 STREET ADDRESS	625 Estuary Dr.	
CITY ST ZIP	BRADENTON FL	34 CITY ST ZIP	Bradenton, FL 34209	
TITLE	SD	41 TITLE		☐ Change ☐ Addition
NAME	MESITI, MARY	42 NAME		
STREET ADDRESS	733 ESTUARY DR.	43 STREET ADDRESS		
CITY ST ZIP	BRADENTON FL	44 CITY ST ZIP		
TITLE	D	51 TITLE	D	☐ Change ☒ Addition
NAME	HOOD, PAUL	52 NAME	Herold, Joseph	
STREET ADDRESS	720 ESTUARY DR.	53 STREET ADDRESS	613 Estuary Dr.	
CITY ST ZIP	BRADENTON FL	54 CITY ST ZIP	Bradenton, FL 34209	
TITLE		61 TITLE		☐ Change ☐ Addition
NAME		62 NAME		
STREET ADDRESS		63 STREET ADDRESS		
CITY ST ZIP		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)(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: Russell T. Stanley Russell T. Stanley, Pres. 4/27/95 813-792-7433
SIGNATURE AND TYPED OR PRINTED NAME OF MANAGING OFFICER OR DIRECTOR — Daytime Phone Number

0017897