

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **N06568 (2)**
1. Corporation Name
CLEARVIEW RESIDENTS COOPERATIVE ASSOCIATION, INC



Principal Place of Business: 1855 CENTER STREET JUPITER FL 33458
Mailing Address: 1855 CENTER STREET JUPITER FL 33458

3. Date Incorporated or Qualified: 12/11/1984
3a. Date of Last Report: 02/15/1995
4. FEI Number: 59-2513915
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

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-30) fields with sub-headers for Suite, Apt. #, City & State, Zip, and Country.

9. Name and Address of Current Registered Agent
**BUZARD, PAUL L.
1855 W CENTER ST LOT 23
JUPITER FL 33458**

10. Name and Address of New Registered Agent (81-85) fields for Name, Street Address, City, and 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: *Paul L. Buzard* DATE: 1-20-96

12. OFFICERS AND DIRECTORS

TITLE: VP	NAME: MONSANTO, JAMES	<input checked="" type="checkbox"/> DELETE
STREET ADDRESS: 1855 CENTER ST LOT 30	CITY-STATE-ZIP: JUPITER FL	
TITLE: PD	NAME: BUZARD, PAUL	<input type="checkbox"/> DELETE
STREET ADDRESS: 1855 CENTER ST LOT 23	CITY-STATE-ZIP: JUPITER FL	
TITLE: TD	NAME: HIGHT, LINDA	<input type="checkbox"/> DELETE
STREET ADDRESS: 1855 CENTER ST LOT #16	CITY-STATE-ZIP: JUPITER FL	
TITLE: SD	NAME: LOHNES, SHERRY LEE	<input type="checkbox"/> DELETE
STREET ADDRESS: 1855 CENTER ST LOT #24	CITY-STATE-ZIP: JUPITER FL	
TITLE: D	NAME: POFFENBERGER, KENNETH	<input type="checkbox"/> DELETE
STREET ADDRESS: 1855 CENTER ST LOT #32	CITY-STATE-ZIP: JUPITER FL	
TITLE:	NAME:	<input type="checkbox"/> DELETE
STREET ADDRESS:	CITY-STATE-ZIP:	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-STATE-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-STATE-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-STATE-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-STATE-ZIP	
5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	V.P. POFFENBERGER, KENNETH
5.3 STREET ADDRESS	1855 CENTER ST LOT #32
5.4 CITY-STATE-ZIP	JUPITER, FL. 33458
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-STATE-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 617, Florida Statutes, and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Paul L. Buzard* DATE: 1-20-96 407-575-2039

CR2E037 (12/95)