

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 # **N09858** (4)

1. Corporation Name

COLONIAL COLONY NORTH HOMEOWNERS ASSOCIATION, INC.
C.



Principal Place of Business

JEAN V.
C/O EDWARD R. REYNAERTS
899 E. COLONIAL CIR.
DAYTONA BEACH FL 32117
US

Mailing Address

JEAN V. REYNAERTS
C/O EDWARD R. REYNAERTS
899 E. COLONIAL CIR.
DAYTONA BEACH FL 32117
US

3. Date Incorporated or Qualified
06/19/1985

3a. Date of Last Report
04/26/1995

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

4. FEI Number
59-2518103

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

10. Name and Address of New Registered Agent

REYNAERTS, JEAN V.
899 E. COLONIAL CIR.
DAYTONA BEACH FL 32117

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's signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

PD
RUDERT, DONALD
876 W. COLONIAL CIR.
DAYTONA BEACH FL

TITLE ☒ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

VPD
MARCOUS, DAN
954 N. COLONIAL CIR.
DAYTONA BEACH FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

SD
REYNAERTS, JEAN V.
899 E. COLONIAL CIR.
DAYTONA BEACH FL

TITLE ☒ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TD
LORD, AUSTEN
920 N. COLONIAL CIR.
DAYTONA BEACH FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

D
DEVROU, BARBARA
910 N. COLONIAL CIR.
DAYTONA BCH. FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

☐ Change ☐ Addition

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☒ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

VPD
SWENSON EDITH
802 E. COLONIAL CIR.
DAYTONA BEACH FL 32117

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TD
MARCOUS, DAN
954 N. COLONIAL CIR
DAYTONA BEACH FL 32117

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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:

JEAN V. REYNAERTS
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/8/96
DATE

904 -

353-1428
Daytime Phone #

CR2E037 (12/95)