

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 JUN 20 PM 1:22

DOCUMENT # N11922 (4)

1. Corporation Name

BOBBIN BROOK HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business

Mailing Address

P. O. BOX 1713
TALLAHASSEE FL 32302
US

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TALLAHASSEE FL 32302
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

11/06/1985

3a. Date of Last Report

04/27/1994

4. FEI Number

59-2855119

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

28 Zip

24 Country

29 Country

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

EATON, JAMES
116 SO. MONROE ST.
TALLAHASSEE FL 32301

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 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

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	DP
NAME	EATON, JAMES
STREET ADDRESS	3682 BOBBIN BROOK CIRCLE
CITY - ST - ZIP	TALLAHASSEE FL
TITLE	DT
NAME	HIGH, ROBERT
STREET ADDRESS	1102 N. GADSDEN
CITY - ST - ZIP	TALLAHASSEE FL
TITLE	DS
NAME	HERNDON, KATHIE M.
STREET ADDRESS	3701 BOBBIN BROOK CIR.
CITY - ST - ZIP	TALLAHASSEE FL
TITLE	D
NAME	MANNHEIMER, DOUG
STREET ADDRESS	215 S. MONROE ST, SUITE 400
CITY - ST - ZIP	TALLAHASSEE FL
TITLE	D
NAME	LAUER, DALE
STREET ADDRESS	1545 ROYMON DIEHL ROAD, SUITE 250
CITY - ST - ZIP	TALLAHASSEE FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1.1 TITLE	DP	☒ Change ☐ Addition
1.2 NAME	RICHARD McEWEN	
1.3 STREET ADDRESS	3752 W. BOBBIN BROOK	
1.4 CITY - ST - ZIP	TALLAHASSEE, FL 32312	
2.1 TITLE	DT	☒ Change ☐ Addition
2.2 NAME	JAMES EATON	
2.3 STREET ADDRESS	3682 BOBBIN BROOK CIRCLE	
2.4 CITY - ST - ZIP	TALLAHASSEE, FL 32312	
3.1 TITLE	DS	☒ Change ☐ Addition
3.2 NAME	ALMENA PETTIT	
3.3 STREET ADDRESS	3737 BOBBIN BROOK CIRCLE	
3.4 CITY - ST - ZIP	TALLAHASSEE, FL 32312	
4.1 TITLE	D	☒ Change ☐ Addition
4.2 NAME	KATHIE HERNDON	
4.3 STREET ADDRESS	3701 BOBBIN BROOK CIRCLE	
4.4 CITY - ST - ZIP	TALLAHASSEE, FL 32312	
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 is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), Florida Statutes. I further certify that the information included 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 person or persons authorized to execute this report as required by Chapter 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

904/224-6289