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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT # N12331

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S. HAWETON EUGENE 27th DELINA WAY AVALON BEACH FL 2989 2. Proceed Paces of Business 22th CALL Review 22th ACAD BEACH FL 2989 2. Proced Paces of Business 22th CALL Review 22th	AVALO	ON BEACH PROPERTY OWI	NERS ASSOCIATION, IN	C.	
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Some and Address of Current Registered Agent 10. Name and Address of New Registered Agent 10. Name and Address 1	Ζφ	Country	Zip	Country	8. This corporation has liability for intangible tax under s. 199.032,
HAMILTON, EUGENE 2704 DELLUNA WAY AVALON BEACH FL 32583 11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the pursuant by the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the pursuant submits with a submit this statement for the pursuant submits with a submit to the provisions of Sections 617,0503, Florida Statutes, the above-named corporation submits this statement for the pursuant submits with a submit to the provisions of Sections 617,0503, Florida Statutes, the above-named corporation submits this statement for the pursuant submits statement for the pursuant submits and submits statement for the pursuant submits statement for the pursuant submits and submits statement for the pursuant submits				Ī	
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2704 DELUNA WAY AVALON BEACH FL 32583 11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-hamed corporation submits this statement for the purpose of dranging its registered office 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 formation and accept the obligations of Section 617,0502, Florida Statutes, and accept the obligations of Section 617,0503. Portal Statutes, and accept the obligations of Section 617,0503. Portal Statutes, and accept the obligations of Section 617,0503. Portal Statutes, and accept the obligations of Section 617,0503. Portal Statutes, and accept the obligations of Section 617,0503. Portal Statutes, and accept the obligation of Section 617,1508, Florida Statutes, the above hamed corporation's board of directors. I hereby accept the approach of barying its registered directors. I hereby accept the approach of degree degent. I am formation of the purpose of dranging its registered objects. I have been degreed agent. I am formation of the purpose of dranging its registered object. I am formation of the purpose of dranging its registered object. I am formation of the purpose of dranging its registered object. I am formation of the purpose of dranging its registered object. I am formation of the purpose of dranging its registered object. I am formation of the purpose of dranging its registered object. I am formation of directors. I hereby accept the approach o	HAMILTON, EUGENE			82 Street	Address (P.O. Box Number is Not Acceptable)
AVALON BEACH FL 32583 83	2704 DELUNA WAY				838 San Miguel St.
11. Pursuant to the provisions of Sections 617.0502 and 617.1508. Florids Statutes, the above named corporation submits this statement for the purpose of changing its agestered object or registered agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. Thereby accept the epportment are registered object. I am state of Florids. Such change was authorized by the corporation's board of directors. Thereby accept the epportment are registered object. I am state of Florids. Such change by the corporation's board of directors. Thereby accept the epportment are registered object. I am state of provided previous activities. SIGNATURE	AVALON	I BEACH FL 32583		83	J
11. Persuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing list registered agent. I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes, and accept the obligations of, Section 617,0503, Florida Statutes, and accept the obligations of, Section 617,0503, Florida Statutes, and accept the obligations of, Section 617,0503, Florida Statutes, and accept the obligations of, Section 617,0503, Florida Statutes, and accept the obligations of, Section 617,0503, Florida Statutes, and accept the obligations of, Section 617,0503, Florida Statutes, and accept the obligations of, Section 617,0503, Florida Statutes, and accept the obligations of, Section 617,0503, Florida Statutes, and accept the obligations of, Section 617,0503, Florida Statutes, and accept the obligations of, Section 617,0503, Florida Statutes, and accept the obligations of, Section 617,0503, Florida Statutes, and accept the obligations of, Section 617,0503, Florida Statutes, and accept the obligations of, Section 617,0503, Florida Statutes, and accept the obligations of section 617,0503, Florida Statutes, and accept the obligations of section 617,0503, Florida Statutes, and accept the obligations of section 617,0503, Florida Statutes, and accept the obligations of section 617,0503, Florida Statutes, and accept the obligations of section 617,0503, Florida Statutes, and accept the obligations of section 617,0503, Florida Statutes, and accept the obligations of sections. In the Carlot of sections, and accept the obligation of sections, and accept the obligation of sections. In the Carlot of sections, and accept the obligation of sections, and accept the obligation of sections. In the Carlot of sections, and accept the obligation of sections, and accept the obligation of sections. In the Section of sections, and accept the obligation of sections, and accept the obligation of sections. In the Section of sections, and accept the ob					Avalon Beach FL 85 Zp Code 33583
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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: Usuata L. Scharz Venetta G. Schang DT 2/19/19 904-994-4963

BIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR