

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

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 FEB 21 AM 9:46

DOCUMENT # N21109 (6)

1. Corporation Name

THE GREATER FOREST HILLS VOLUNTEER SECURITY PATROL, INC.

Principal Place of Business

Mailing Address

1749 HARPOON DRIVE
FOREST HILLS CIVIC ASSN. CLUBHOUSE
HOLIDAY FL 34690
US

P.O. BOX 3498
HOLIDAY FL 34690
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
06/11/1987

3a. Date of Last Report
03/01/1994

4. FEI Number
59-2833115

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

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

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 Country

29 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

VERBOCY, ELMER
1538 PLUMTREE ROAD
HOLIDAY FL 34690

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

Elmer A. Verboey
Signature, typed or printed name of registered agent, and if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD
NAME	VERBOCY, ELMER
STREET ADDRESS	1538 PLUMTREE ROAD
CITY - ST - ZIP	HOLIDAY FL
TITLE	SD
NAME	WOODHOUSE, FRANCES M
STREET ADDRESS	5716 MOSAIC DRIVE
CITY - ST - ZIP	HOLIDAY FL
TITLE	TD
NAME	DOMINY, BETHENE S
STREET ADDRESS	5703 BITTERSWEET DRIVE
CITY - ST - ZIP	HOLIDAY FL
TITLE	V
NAME	BAILEY, ROBERT W
STREET ADDRESS	5423 FOREST HILLS DRIVE
CITY - ST - ZIP	HOLIDAY FL
TITLE	V
NAME	CARTER, J. P
STREET ADDRESS	5521 FLORA AVENUE
CITY - ST - ZIP	HOLIDAY FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
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 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Elmer A. Verboey
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/11/95 (813) 934-0780
Date Signature Number