

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 # N26735 (3)

1. Corporation Name

NEPTUNE BY THE SEA HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

Mailing Address

% MR. EARL WEST
620 MCCOLLUM CIRCLE
NEPTUNE BCH FL 32266
US

% MR. EARL WEST
620 MCCOLLUM CIRCLE
NEPTUNE BCH FL 32266
US

3. Date Incorporated or Qualified
06/02/1988

3a. Date of Last Report
04/14/1995

2. Principal Place of Business

2a. Mailing Address

21 607 MCCOLLUM CIRCLE

26 607 MCCOLLUM CIRCLE

4. FEI Number
59-2893769

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

City & State

City & State

23 NEPTUNE BEACH, FLORIDA

28 NEPTUNE BEACH, FLORIDA

6. Election Campaign Financing
Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

Zip Country
24 32266-6231 25 USA

Zip Country
29 32266-6231 30 USA

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

**SCALLY, LAWRENCE
624 MCCOLLUM CIRCLE
NEPTUNE BEACH FL 32266**

81 Name STEWART GEIGER
82 Street Address (P.O. Box Number is Not Acceptable) 607 MCCOLLUM CIRCLE
83
84 City NEPTUNE BEACH FL 85 Zip Code 32266-6231

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

Stewart Geiger
Signature, typed or printed name of registered agent (if applicable)

STEWART GEIGER, TREASURER

3/6/96

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME **PD TUCK, BARBARA**
STREET ADDRESS **828 MCCOLLUM CIRCLE**
CITY-ST-ZIP **NEPTUNE BCH FL**

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

TITLE ☐ DELETE
NAME **TD GEIGER, STEWARD**
STREET ADDRESS **607 MCCOLLUM CIRCLE**
CITY-ST-ZIP **NEPTUNE BEACH FL**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME **STEWART**
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME **SD SUSMAN, GENE**
STREET ADDRESS **621 MCCOLLUM CIRCLE**
CITY-ST-ZIP **NEPTUNE BCH FL**

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

TITLE ☒ DELETE
NAME **D WEST, EARL**
STREET ADDRESS **620 MCCOLLUM CIRCLE**
CITY-ST-ZIP **NEPTUNE BEACH FL**

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

TITLE ☐ DELETE
NAME **VD AUSTIN, KAREN**
STREET ADDRESS **518 MCCOLLUM CIRCLE**
CITY-ST-ZIP **NEPTUNE BEACH FL**

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

TITLE ☐ DELETE
NAME
STREET ADDRESS
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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Stewart Geiger
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

STEWART GEIGER, TREASURER

3/6/96

904 354-0869

Date

Daytime Phone #

CR2E037 (12/95)