FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # NIO7704

/Q\

1. Corporation	Name ADES HOMEOWNERS AS	(-/				
14560 EL PASEO DRIVE 14560 EL PASEO		- ASTEPHEN O - OHUMBRI 14560 EL PASEO DRIVE	3	100/110		
SEMINOLE FL	. 34646	SEMINOLE FL 34646		3. Date Incorporated or Qualified 08/03/1988	3a. Date of Last Report 03/22/1995	
Principal Place of Business 21		2a. Mailing Address 26		4. FEI Number 59-2949722	Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State		City & State		6. Election Campaign Financing	□ \$5.00 May Be	
23 Zip	Country	Zip	Country	Trust Fund Contribution 8. This corporation has liability for In	Added to rees	
24	25	29	30	Florida Statutes	Yes No	
	9. Name and Address of Curre	nt Registered Agent	81 Name	10. Name and Address of New Re	gistered Agent	
PHILIP BENGOLA, SR.			G.	GEORGE R MOCK		
14567 EL PASEO DR.				Street Address (P.O. Box Number Is Not Acceptable) 14508 ALEJO COURT		
SEMINO	LE FL 34646		83			
				EMINOLE	FL 85 3 46 46	
11. Pursuant t	o the provisions of Sections 617,050 and agent or both, in the State of Flor	2 and 617,1508, Florida Statutes	the above-named corpor	ation submits this statement for the purp rd of directors. I hereby accept the appoi	ose of changing its registered office intment as registered agent. I am	
familiar wit	th, and accept the obligations of Sec	tion 617.0503, Florida Statutes.	ASURER-DIRE			
SIGNATURE _	Signature, typed or printed rights of registered agen		F: Registered Agent signature requires		.5-96 DATE	
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC		
TITLE	PD PETERSEN C. THOMAS	>∑ 0elete		PD	Change KAddition	
NAME STREET ADDRESS	AAFOO ALFIO OT		4 A GERCET ARGRESS	MAIER, RICHARD L		
CITY-ST-ZIP	SEMINOLE FL		1.4 CITY-ST-ZIP	seminoel, pasegaba	ve	
TITLE	D	DELETE		SD	Change Addition	
NAME	MASLANKA, BRIAN			NEELY, DIANA S		
STREET ADDRESS	14522 ALEJO COURT SEMINOLE FL			14518 ALEJO COURT SEMINOLE, FL 34640	<u> </u>	
CITY-ST-ZIP TITLE	SD SEMINOLE PL	X DELETE	2. 4 CITY-ST-ZIP 3.1 TITLE	PEWINOPE, EP 24046	Change Addition	
NAME	BENYOLA PHILIP, SR	24	3.2 NAME			
STREET ADDRESS	14567 EL PASEO DR.		3.3 STREET ADDRESS			
CITY-ST-ZIP	SEMINOLE FL		3.4. CITY-ST-ZIP			
TITLE	I Mock, george R	DELETE		LD	Change Addition	
NAME STREET ADDRESS	14508 ALEJO CT		4. 2 NAME 4.3 STREET ADDRESS			
CITY-ST-ZIP	SEMINOLE FL		4.4 CITY-ST-ZIP			
TITLE	······································	DELETE	5 1 TITLE		☐ Change ☐ Addition	
NAME			52 NAME			
STREET ADDRESS			5 3 STREET ADDRESS			
CITY-ST-ZIP		DELETE	5 4 CITY - ST - ZIP 6.1 TITLE	· · · · · · · · · · · · · · · · · · ·	☐ Change ☐ Addition	
TITLE NAME		Florerit	6.2 NAME			
STREET ADDRESS			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 eath; 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:

L-GBORGE R. MOCK 3-5-96 813-596-4490

NINO OFFICER OR DIRECTOR

Details

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CR2E037 (12/95)