

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 MAR 22 PM 3:47

DOCUMENT # **N35487** (0)

1. Corporation Name

GLEN EAGLES AT SPRUCE CREEK HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

~~670 S.W. SHIPLEY DR.~~
100 CESSNA BLVD STE C A
DAYTONA BEACH FL 32124

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100 CESSNA BLVD STE C A
DAYTONA BEACH FL 32124

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/04/1989

3a. Date of Last Report

04/07/1994

4. FEI Number

59-2980947

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

Country

28 Zip

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

~~SCHWARZ EDWARD~~
~~157 S RIDGEWOOD AVE~~
~~DAYTONA BEACH FL 32124~~

81 Name **Karla L. Baumann**

82 Street Address (P.O. Box Number is Not Acceptable)
100 Cessna Boulevard, Suite A

83 **Daytona Beach**

84 City

FL

85 Zip Code

32124

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]

Karla L. Baumann

2-21-95

(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 ~~PO~~
NAME ~~BARSHAY, RAYMOND~~
STREET ADDRESS ~~100 CESSNA ROAD~~
CITY-ST-ZIP ~~DAYTONA BEACH FL 32124~~

1.1 TITLE Secretary/Director Change Addition
1.2 NAME Tom Hinkley
1.3 STREET ADDRESS 2642 Spruce Creek Blvd.
1.4 CITY-ST-ZIP Daytona Beach, FL 32124

TITLE ~~VB~~
NAME ~~SLADE, E. LAWRENCE~~
STREET ADDRESS ~~311 N. VINCE MORRIS BLVD. STE 300~~
CITY-ST-ZIP ~~DAYTONA BEACH FL 32124~~

2.1 TITLE Director Change Addition
2.2 NAME Libby Clary
2.3 STREET ADDRESS 2693 Spruce Creek Blvd.
2.4 CITY-ST-ZIP Daytona Beach, FL 32124

TITLE ~~PO~~
NAME ~~SCHWARZ EDWARD~~
STREET ADDRESS ~~157 S RIDGEWOOD AVE~~
CITY-ST-ZIP ~~DAYTONA BEACH FL 32124~~

3.1 TITLE Director Change Addition
3.2 NAME Jack Peck
3.3 STREET ADDRESS 2033 King Air Court
3.4 CITY-ST-ZIP Daytona Beach, FL 32124

TITLE President/Director
NAME Marguerite Cummock
STREET ADDRESS 2890 Borman Court
CITY-ST-ZIP Daytona Beach, FL 32124

4.1 TITLE Director Change Addition
4.2 NAME Curtis Roberts
4.3 STREET ADDRESS 1705 Baron Court
4.4 CITY-ST-ZIP Daytona Beach, FL 32124

TITLE Vice President/Director
NAME Tom Olson
STREET ADDRESS 2689 Spruce Creek Blvd.
CITY-ST-ZIP Daytona Beach, FL 32124

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

TITLE Treasurer/Director
NAME Debbie Cheeseman
STREET ADDRESS 2725 Spruce Creek Blvd.
CITY-ST-ZIP Daytona Beach, FL 32124

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 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: *Debra L. Cheeseman, Treasurer* 2-21-95 760-5884
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Debra L. Cheeseman, Treasurer