



FILED

Mar 28 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997				FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS		Mar 28 1997 8:00am Secretary of State	
DOCUMENT # N35813 (7)							
1. Corporation Name LAUREL CIVIC ASSOCIATION, INC.							
Principal Place of Business C/O SANDRA G. TERRY 728 CHURCH STREET LAUREL FL 34272				Mailing Address C/O SANDRA TERRY PO BOX 511 LAUREL FL 34272-0511 US		3. Date Incorporated or Qualified 12/18/1989	
2. Principal Place of Business				2a. Mailing Address		3a. Date of Last Report 02/07/1996	
21 Suite, Apt. #, etc.				26 Suite, Apt. #, etc.		4. FEI Number 65-0187752	
22 City & State				27 City & State		Applied For Not Applicable	
23 Zip				28 Zip		5. Certificate of Status Desired <input checked="" type="checkbox"/> \$8.75 Additional Fee Required	
24 Country				30 Country		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
9. Name and Address of Current Registered Agent TERRY, SANDRA G. 728 CHURCH STREET LAUREL FL 34272				10. Name and Address of New Registered Agent			
				81 Name			
				82 Street Address (P.O. Box Number is Not Acceptable)			
				83			
				84 City			
				85 Zip Code			
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____							
12. OFFICERS AND DIRECTORS							
13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12							
1.1 TITLE							
1.2 NAME							
1.3 STREET ADDRESS							
1.4 CITY - ST - ZIP							
2.1 TITLE							
2.2 NAME							
2.3 STREET ADDRESS							
2.4 CITY - ST - ZIP							
3.1 TITLE							
3.2 NAME							
3.3 STREET ADDRESS							
3.4 CITY - ST - ZIP							
4.1 TITLE							
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4.3 STREET ADDRESS							
4.4 CITY - ST - ZIP							
5.1 TITLE							
5.2 NAME							
5.3 STREET ADDRESS							
5.4 CITY - ST - ZIP							
6.1 TITLE							
6.2 NAME							
6.3 STREET ADDRESS							
6.4 CITY - ST - ZIP							
14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: Sandra Terry NEOL SANDRA TERRY 3-2497 483-3332							

CB2F037 (9/06)