

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

DOCUMENT # **N39156** (7)  
1. Corporation Name  
**RIVIERA BEACH HOMEOWNER'S ASSOCIATION, INC.**



Principal Place of Business Mailing Address  
**TERRELL BREED**  
**9526 MONACO CIRCLE**  
**NAVARRE FL 32566**

3. Date Incorporated or Qualified **06/07/1990** 3a. Date of Last Report **02/20/1995**  
4. FEI Number **59-3054721** 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**  
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 Zip  
24 Country 29 Country  
25 Country 30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BREED, TERRELL**  
**9526 MONACO CIRCLE**  
**NAVARRE FL 32566**

81 Name  
82 Street Address (P.O. Box Number is Not Acceptable)  
83  
84 City  
85 Zip Code  
**FL**

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

Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS  
TITLE NAME STREET ADDRESS CITY - ST - ZIP  
P **BREED, TERRELL** ☐ DELETE  
**9526 MONACO CIRCLE**  
**NAVARRE FL**  
D **SPENCER, CHERYL** ☒ DELETE  
**9526 RAINIER CIRCLE**  
**NAVARRE FL**  
S **MADDEN, MICHELE** ☒ DELETE  
**9533 MONTE CIRCLE**  
**NAVARRE FL 32566**  
T **PELEZO, HOLLY** ☒ DELETE  
**9532 RAINIER CIRCLE**  
**NAVARRE FL**  
D **KANE, JAMES** ☐ DELETE  
**9532 MONTE CARLO CIRCLE**  
**NAVARRE FL**  
D **BREED, SUE** ☐ DELETE  
**9526 MONACO CIRCLE**  
**NAVARRE FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  
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 **D/S Kane, Judy**  
2.3 STREET ADDRESS **9532 Monte Carlo Circle**  
2.4 CITY - ST - ZIP **Navarre, FL 32566**  
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 **Treasurer** ☒ 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

**James M. Kane**  
**9532 Monte Carlo Circle**  
**Navarre, FL 32566**

4-29-96

(904) 833-3614

Date

Daytime Phone #

CR2E037 (12/95)