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NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



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

FILED  
Aug 16, 1996 08:00 AM  
Secretary of State

DOCUMENT # N39297 (9)

1. Corporation Name

CLOISTERS HOMEOWNERS ASSOCIATION OF BREVARD, INC



Principal Place of Business

Mailing Address

1745 N RIVERSIDE DR  
INDIALANTIC FL 32903  
US

1745 N RIVERSIDE DR  
INDIALANTIC FL 32903  
US

3. Date Incorporated or Qualified

07/16/1990

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-3026854

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

FOX, KRISTY W

1745 N RIVERSIDE DR

INDIALANTIC FL 32903

ANKNEY, DUANE A.

Street Address (P.O. Box Number is Not Acceptable)

1745 N RIVERSIDE DR

83

84

CITY INDIALANTIC

FL

85 Zip Code  
32903

11. Pursuant to the provisions of Sections 617.0502 and 617.1506, 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

*Duane A. Ankney, Pres.*

7/22/96

DATE

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

(NOTE: Registered Agent signature required when translating)

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE

NAME ANKNEY, DUANE  
STREET ADDRESS 1745 N RIVERSIDE DR  
CITY-ST-ZIP INDIALANTIC FL

TITLE D ☒ DELETE

NAME ANKNEY, DIANE W.  
STREET ADDRESS 1745 N RIVERSIDE DR  
CITY-ST-ZIP INDIALANTIC FL

TITLE D ☒ DELETE

NAME FOX, KRISTY  
STREET ADDRESS 1745 N RIVERSIDE DR  
CITY-ST-ZIP INDIALANTIC FL

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY-ST-ZIP

21 TITLE

22 NAME

23 STREET ADDRESS

24 CITY-ST-ZIP

31 TITLE

32 NAME

33 STREET ADDRESS

34 CITY-ST-ZIP

41 TITLE

42 NAME

43 STREET ADDRESS

44 CITY-ST-ZIP

51 TITLE

52 NAME

53 STREET ADDRESS

54 CITY-ST-ZIP

61 TITLE

62 NAME

63 STREET ADDRESS

64 CITY-ST-ZIP

VP/D

FAIR, WALTER

1745 N RIVERSIDE DR.

INDIALANTIC FL

S/D

WILCZYNSKI, BILL

1745 N RIVERSIDE DR

INDIALANTIC FL

200001925032  
-08/19/96--01006--018  
\*\*\*61.25

SIGNATURE:

*Duane A. Ankney, Pres.*

5/31/96

Date

407-952-3500

Daytime Phone #

CR2E037 (12/95)