

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N40023 (6)

1. Corporation Name

BRADENTON BEACH CIVIC ASSOCIATION, INC.



Principal Place of Business

109 7TH ST
P. O. BOX 181
BRADENTON FL 34217
US

Mailing Address

402 BAY DRIVE SOUTH
P. O. BOX 181
BRADENTON BEACH FL 34217

3. Date Incorporated or Qualified
09/17/1990

3a. Date of Last Report
06/12/1995

2. Principal Place of Business

21 **1107 BAY DR. No.**

2a. Mailing Address

26 **P.O. BOX 181**

4. FEI Number
65-0214881

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

City & State

23 **BRADENTON BEACH, FL.**

City & State

28 **BRADENTON BEACH, FL.**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

Zip

Country

24 **34217**

25 **US**

Zip

Country

29 **34217**

30 **US**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

**BROWN, DONALD
109 7TH ST
BRADENTON BEACH FL 34217**

10. Name and Address of New Registered Agent

81 Name **WALTER C. GRACE**
82 Street Address (P.O. Box Number is Not Acceptable)
1107 BAY DR. No.
83
84 City **BRADENTON BEACH, FL** 85 Zip Code **34217**

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 *Walter C. Grace*

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 **CD** ☒ DELETE
NAME **BROWN, DONALD**
STREET ADDRESS **109 7TH ST**
CITY - ST - ZIP **BRADENTON FL**

TITLE **VCD** ☐ DELETE
NAME **HOEY, KAY**
STREET ADDRESS **501 GULF DR N**
CITY - ST - ZIP **BRADENTON BEACH FL**

TITLE **D** ☒ DELETE
NAME **NORMAN, MICHAEL**
STREET ADDRESS **2314 CANASTA DR**
CITY - ST - ZIP **BRADENTON FL**

TITLE **SD** ☒ DELETE
NAME **KLOSKY, KAREN**
STREET ADDRESS **2001 GULF DR**
CITY - ST - ZIP **BRADENTON BEACH FL**

TITLE **DT** ☒ DELETE
NAME **BEATON, DAVID**
STREET ADDRESS **110 9TH ST N**
CITY - ST - ZIP **BRADENTON BEACH FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **CD** ☒ Change ☐ Addition
1.2 NAME **WALTER C. GRACE**
1.3 STREET ADDRESS **1107 BAY DR. NO.**
1.4 CITY - ST - ZIP **BRADENTON BEACH, FL. 34217**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

3.1 TITLE **D** ☒ Change ☐ Addition
3.2 NAME **TOM HOEY**
3.3 STREET ADDRESS **501 GULF DR. NO.**
3.4 CITY - ST - ZIP **BRADENTON BEACH, FL. 34217**

4.1 TITLE **SD** ☒ Change ☐ Addition
4.2 NAME **KEN LOHN**
4.3 STREET ADDRESS **501 BAY DR. SO.**
4.4 CITY - ST - ZIP **BRADENTON BEACH, FL. 34217**

5.1 TITLE **DT** ☒ Change ☐ Addition
5.2 NAME **JAMES W. KISSICK, JR**
5.3 STREET ADDRESS **104 5TH ST. SO.**
5.4 CITY - ST - ZIP **BRADENTON BEACH, FL. 34217**

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 W. Kissick Jr* **JAMES W. KISSICK JR** 5/23/96 (941) 778-1154

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)