

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

**APPROVED
AND
FILED**

95 MAY -1 AM 11:37

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N41864 (2)

1. Corporation Name

MOBILAND BY THE SEA HOMEOWNERS ASSOCIATION, INC.

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 01/28/1991	3a. Date of Last Report 05/01/1994
4. FEI Number 59-3106726	☐ 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
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. 109.032, 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

9. Name and Address of Current Registered Agent
DORSEY, DENNIS E. 4682 BLUE JAY LANE LOT #296 MELBOURNE FL 32935

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 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, typed or printed name of registered agent and title if applicable.) (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DAP	1.1 TITLE	MD
NAME	DORSEY, DENNIS E.	1.2 NAME	DORSEY, DENNIS E.
STREET ADDRESS	4682 BLUE JAY LANE	1.3 STREET ADDRESS	4682 BLUE JAY LANE
CITY-ST-ZIP	MELBOURNE FL	1.4 CITY-ST-ZIP	MELBOURNE, FL, 32935
TITLE	DV	2.1 TITLE	PD
NAME	GULLAUME, LENARD S	2.2 NAME	FRANK CONVERTINO
STREET ADDRESS	2040 MOBILAND DRIVE	2.3 STREET ADDRESS	4663 BLUE JAY LANE
CITY-ST-ZIP	MELBOURNE FL	2.4 CITY-ST-ZIP	MELBOURNE, FL, 32935
TITLE	DS	3.1 TITLE	VD
NAME	CARD, ROGER	3.2 NAME	SHOR, ETHEL
STREET ADDRESS	2119 MOBILAND DRIVE	3.3 STREET ADDRESS	2998 MOBILAND DRIVE
CITY-ST-ZIP	MELBOURNE FL	3.4 CITY-ST-ZIP	MELBOURNE, FL, 32935
TITLE	DT	4.1 TITLE	SD
NAME	SEDOR, STEVEN	4.2 NAME	DAYTON, JOAN
STREET ADDRESS	4455 UTICA CIRCLE	4.3 STREET ADDRESS	4673 BLUE JAY LANE
CITY-ST-ZIP	MELBOURNE FL	4.4 CITY-ST-ZIP	MELBOURNE, FL, 32935
TITLE	D	5.1 TITLE	TD
NAME	GIANGOLINI, LORENZA	5.2 NAME	SEDOR, STEVEN
STREET ADDRESS	4459 UTICA CIRCLE	5.3 STREET ADDRESS	4455 UTICA CIRCLE
CITY-ST-ZIP	MELBOURNE FL	5.4 CITY-ST-ZIP	MELBOURNE, FL, 32935
TITLE	D	6.1 TITLE	
NAME	CONVERTINO, FRANK	6.2 NAME	
STREET ADDRESS	4683 BLUE JAY LANE	6.3 STREET ADDRESS	
CITY-ST-ZIP	MELBOURNE FL	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)(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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Steven Sedor **STEVEN SEDOR** 4-24-95

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

(Typed Name)