

FILE NOW: FILING FEE IS \$61.25

FILED

Apr 28 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
<b>DOCUMENT # N44149 (5)</b> 1. Corporation Name <b>HERNANDO BEACH BUSINESS ASSOCIATION, INC.</b>			



Principal Place of Business <b>3422 SHOAL LINE BLVD HERNANDO BEACH FL 34807 US</b>		Mailing Address <b>3422 SHOAL LINE BLVD HERNANDO BEACH FL 34807 US</b>	
2. Principal Place of Business 21 <b>3399 Eagle Nest Dr.</b> Suite, Apt. #, etc.	2a. Mailing Address 26 <b>3399 EAGLE NEST DR.</b> Suite, Apt. #, etc.	3. Date Incorporated or Qualified <b>06/28/1991</b>	
22 City & State 23 <b>HERNANDO BEACH FL</b> Zip Country 24 <b>34607</b> 25 <b>US</b>	27 City & State 28 <b>HERNANDO BEACH FL</b> Zip Country 29 <b>34607</b> 30 <b>US</b>	4. FEI Number <b>59-3088370</b> Applied For Not Applicable	
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent <b>CHARNOCK, WILLIAM T., III 6358 SPRING HILL DRIVE SPRING HILL FL 34806</b>		10. Name and Address of New Registered Agent	
81 Name		82 Street Address (P.O. Box Number is Not Acceptable)	
83 City		84 Zip Code <b>FL</b>	

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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>ERICKSON, RAY 3176 SHOAL LINE BLVD. HERNANDO BEACH FL</b>	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	<b>T Camille Butler 4317 Callienta St. Hernando Beach FL 34607</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>LENTINI, JOAN 3399 EAGLE NEST DRIVE HERNANDO BEACH FL</b>	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	<b>VP Charles Morton 4317 Callienta St. Hernando Beach, FL 34607</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>MANDES, TERRY 18806 ALEXSON STREET SPRING HILL FL</b>	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	<b>VP DENNIS COOPER 3484 MINNOW CREEK DRIVE HERNANDO BEACH FL 34607</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>TURNER, RUBY 15299 CORTEZ BLVD. BROOKVILLE FL</b>	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	<b>S Margaret Redmile 4108 Shoal Line Blvd HERNANDO BEACH FL 34607</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>KALF, MIRAN 4004 SHOAL LINE BLVD. HERNANDO BEACH FL</b>	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	<b>SC 428</b>
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<b>BROOKS, SHARON 3193 A SHOAL LINE BLVD. HERNANDO BEACH FL</b>	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<b>800002502768 -04/28/98--01050--014 ***\$1.25</b>

14. I 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: *Joan M. Lentini* Date: *4-16-98* 352-597-2000

CR2E037 (10/97)