

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # N49196

(1)

1. Corporation Name

EAGLES WATCH AT THE PRESERVE ASSOCIATION, INC.

Principal Place of Business

Mailing Address

~~8301 EAGLE LAKE DRIVE~~
SARASOTA FL 34241
US

~~8301 EAGLE LAKE DRIVE~~
SARASOTA FL 34241
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
06/02/1992

3a. Date of Last Report
08/09/1994

4. FEI Number
65-0418150

Applied For
Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 8457 Eagle Preserve Way 22 8457 Eagle Preserve Way

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22
City & State
Sarasota, FL

27
City & State
Sarasota, FL

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

24 Zip **34241** **25** Country **USA**

29 Zip **34241** **30** Country **USA**

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

**REES, STEPHEN D.
2033 MAIN STREET, SUITE 600
SARASOTA FL 34237**

81 Name

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

83

84 City

FL

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 re-registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD**
NAME **FISCHER, RICHARD M.**
STREET ADDRESS **8301 EAGLE LAKE DRIVE**
CITY - ST - ZIP **SARASOTA FL 34241**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS **8457 Eagle Preserve Way**
1.4 CITY - ST - ZIP **Sarasota, FL 34241**

TITLE **VSD**
NAME **STARLING, FRED M.**
STREET ADDRESS **8301 EAGLE LAKE DRIVE**
CITY - ST - ZIP **SARASOTA FL 34241**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS **8457 Eagle Preserve Way**
2.4 CITY - ST - ZIP **Sarasota, FL 34241**

TITLE **ASTD**
NAME **COX, PEGGY B.**
STREET ADDRESS **8301 EAGLE LAKE DRIVE**
CITY - ST - ZIP **SARASOTA FL 34241**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS **8457 Eagle Preserve Way**
3.4 CITY - ST - ZIP **Sarasota, FL 34241**

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
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 110.07(3)(b), 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 owner 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:

Fred M. Starling
Signature and typed or printed name of signing officer or director

* Fred M. Starling, V.P. 4/26/95

813-923-2186