FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1997

N50824 DOCUMENT #
1. Corporation Name

(4)

CONCERNED CITIZENS OF HIGHLAND BEACH, INC.

Principal Place of Business		Mailing Address				I MINI MANIT MINIT MANIT MINIT NINIT NINIT NINIT	
4105 S OCEAN HIGHLAND BEAC			4105 S OCEAN BLVD HIGHLAND BEACH FL 33487-3307				
					 Date Incorporated or Qualified 09/14/1992 	3a. Date of Last Report 01/29/1996	
2. Principal Pi	ace of Business	2a. Mailing Add	iress		4. FEI Number 65-0356620	Applied For Not Applicable	
Suite, Apt. #, etc.		Suite, Apt.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	,	City & State	1		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
Ζ(p	Country 25	Zip 29	30 Cou	intry	This corporation has liability for Florida Statutes	r intangible tax under s. 199.032,	
***	9. Name and Address of Cu				10. Name and Address of New R	legistered Agent	
		-		81 Name			
CAYCE, KING 4105 S OCEAN BLVD				82 Street Ad	idress (P.O. Box Number is Not Acceptable)		
	ID BEACH FL 33487			83			
				84 City		FL 85 Zip Code	
office or re	o the provisions of Sections 617 egistered agent, or both, in the S m familiar with, and accept the o	State of Florida. Such cha	ınge was authorize	d by the corpor	orporation submits this statement for the ration's board of directors. I hereby acc	purpose of changing its registered ept the appointment as registered	
SIGNATURE _	Signature, typed or printed name of registers				quired when reinstating)	DATE	
12,		AND DIRECTORS	13.	a Agent eighteen the	ADDITIONS/CHANGES TO OFF		
TITLE	D		DELETE 1.1 TI	TLE	<u> </u>	Change Addition	
NAME	BELL, LEONARD		1.2 N	AME .	LOWE, ROBERT		
STREET ADDRESS	2727 S OCEAN BLVD		1.3 \$1	TREET ADDRESS	3221 SO OCEAN+	12.907	
CITY - ST - ZIP	HIGHLAND BEACH FL			TY-ST-ZIP		33484	
TITLE	D		DELETE 2.1 TI		D	Change Addition	
NAME	CAYCE, KING		2.2 N	AME 4	ERARD GOLDEN		
STREET ADDRESS	4105 S OCEAN BLVD		2.3 \$		3505 36 OCEAN		
CITY-S1-ZIP	HIGHLAND BEACH FL		2.40	HTY-ST-ZIP	416ALAND BCH FL	33487	
TITLE	D		DELETE 3.1 TI		D	☐ Change ☑ Addition	
NAME	REID, THOMAS		3.2 N	AME S	JAMES BARRY		
STREET ADDRESS	3015 S OCEAN BLVD		3.3 S	TREET ADDRESS	4015 SO OCEAN		
CHTY-ST-ZIP	HIGHLAND BEACH FL		3.4. 0	CITY-ST-ZIP	HIGHLAND BOTH FL	<u>23487 / </u>	
TITLE			DELETE 4.1 TH		P	Change Addition	
NAMÉ			4. 2 N	IAME /	RAY MURRAY		
STREET ADDRESS			4.3 \$	TREET ADDRESS	402350 DEERW		
CITY-ST-ZIP			4.4 C	ITY-ST-ZIP	RAY ALVEVAY YOU 3 SO BEEAND YNGH LAND BLANGE.	<i>3348</i> 7	
TITLE			DELETE 5.1 T	TLE		Change Addition	
NAME			5.2 N	AME			
STREET ADDRESS			5.3 S	TREET ADDRESS			
C(TY - ST - ZIP			5.4 C	ity-st-zip			
TITLE			DELETE 6.1 TI	TLE		☐ Change ☐ Addition	
NAME			6.2 N	AME	اد	/ <i>\text{\tint{\text{\tint{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tint{\text{\tint{\text{\tint{\text{\tint{\text{\text{\tint{\text{\text{\tint{\tinit{\text{\text{\text{\text{\text{\text{\tinit}\\ \text{\text{\text{\text{\text{\text{\text{\text{\text{\text{\tex{\tex</i>	
STREET ADDRESS			6.3 S	TREET ADDRESS	a what	. or UNG!	

6.4 CITY-ST-ZIP

CITY - ST - ZIP

14. I do 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.

FILED

Mar 05 1997 8:00am

Secretary of State

Daytime Phone # 0039739