

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

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 MAY -1 AM 11:36

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N93000002788 (8)

1. Corporation Name

BEVERLY HARBORS HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

1330 CITIZENS BLVD
#301
LEESBURG FL 34748

1330 CITIZENS BLVD
#301
LEESBURG FL 34748

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
06/22/1993

3a. Date of Last Report
05/01/1994

4. FEI Number
59-3195559

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. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ERA, TOM GRIZZARD, INC.
C/O TOM GRIZZARD
1330 CITIZENS BLVD #301
LEESBURG FL 34748**

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD**
NAME **TRUSSELL, WOODLEY G**
STREET ADDRESS **1400A N MOSSWOOD DR**
CITY - ST - ZIP **LEESBURG FL 34748**

1.1 TITLE **PD** ☒ Change ☐ Addition
1.2 NAME **WILLIAM HERLONG**
1.3 STREET ADDRESS **1404 Regency Ct.**
1.4 CITY - ST - ZIP **LEESBURG, FL 34748**

TITLE **VD**
NAME **MANLY, E C**
STREET ADDRESS **1125 SUNSHINE AVE**
CITY - ST - ZIP **LEESBURG FL 34748**

2.1 TITLE **VD** ☒ Change ☐ Addition
2.2 NAME **WILLIAM GILMER**
2.3 STREET ADDRESS **1402 Regency Ct.**
2.4 CITY - ST - ZIP **Leesburg, FL 34748**

TITLE **SD**
NAME **KNOWLES, EVA P**
STREET ADDRESS **1400D N MOSSWOOD DR**
CITY - ST - ZIP **LEESBURG FL 34748**

3.1 TITLE **SD** ☒ Change ☐ Addition
3.2 NAME **FRED SHAW**
3.3 STREET ADDRESS **1406 Regency Ct.**
3.4 CITY - ST - ZIP **Leesburg, FL 34748**

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)(4), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF MONITORING OFFICER OR DIRECTOR

Date

Signature Herein