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FILED

May 12 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N94000002278 (9)

1. Corporation Name

TITUSVILLE GIBSON COMMUNITY ASSOCIATION, INC.

Principal Place of Business

Mailing Address

3880 PINETOP BLVD.
TITUSVILLE FL 327963880 PINETOP BLVD.
TITUSVILLE FL 32796-36093. Date Incorporated or Qualified
05/09/19943a. Date of Last Report
04/09/1996

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

4. FEI Number

59-3257131

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees8. 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

WILLIAMS, FRANK E
3880 PINETOP BLVD.
TITUSVILLE FL 32796

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 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 DP ☐ DELETE
NAME WILLIAMS, FRANK E
STREET ADDRESS 3880 PINETOP BOULEVARD
CITY-ST-ZIP TITUSVILLE FL1.1 TITLE TREASURY ☐ Change ☒ Addition
1.2 NAME CANNON, ANTHONY E.
1.3 STREET ADDRESS 4870 CATHEDRAL WAY
1.4 CITY-ST-ZIP TITUSVILLE, FL 32780TITLE D ☐ DELETE
NAME DIGGS, J. ALBERT JR.
STREET ADDRESS 5120 KIRKWOOD TRAIL
CITY-ST-ZIP TITUSVILLE FL 327802.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIPTITLE S ☐ DELETE
NAME DAVIS, RITA
STREET ADDRESS 742 WAGNER ST
CITY-ST-ZIP TITUSVILLE FL 327823.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIPTITLE D ☒ DELETE
NAME GREEN, ERIC
STREET ADDRESS 1956 N. CARPENTER ROAD
CITY-ST-ZIP TITUSVILLE FL 327964.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIPTITLE D ☐ DELETE
NAME JOHNSON, EARL W
STREET ADDRESS 1321-J CHENEY HIGHWAY
CITY-ST-ZIP TITUSVILLE FL 327805.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIPTITLE D ☐ DELETE
NAME LAWS, LORENZO DR.
STREET ADDRESS 720 OLIVE AVENUE
CITY-ST-ZIP TITUSVILLE FL 327806.1 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 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: ANTHONY E. CANNON, SECRETARY 04/30/97 823-5889
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0015554

CR2E037 (9/96)