

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

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

53 MAY -1 PM 8:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N94000002815 (8)

1. Corporation Name

FALCON RIDGE NEIGHBORHOOD ASSOCIATION, INC.

Principal Place of Business

Mailing Address

10681 REGENT CIRCLE
NAPLES FL 33942

10681 REGENT CIRCLE
NAPLES FL 33942

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
06/06/1994

3a. Date of Last Report
INITIAL FILING

4. FEI Number

APPLIED FOR 4/24/95

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 *P.O. Box 400 207*

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LOCKER, JOSEPH R JR.
2150 GOODLETTE RD.
6TH FLOOR
NAPLES FL 33940

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 of agent or printed name of registered agent and title of agent

(X) FEI (Registered Agent signature required when changing)

(All)

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D
NAME	RYAN, GEORGE SR.
STREET ADDRESS	10681 REGENT CIRCLE
CITY, ST, ZIP	NAPLES FL 33942
TITLE	D
NAME	RYAN, GEORGE JR.
STREET ADDRESS	10681 REGENT CIRCLE
CITY, ST, ZIP	NAPLES FL 33942
TITLE	D
NAME	PARADIS, JAMES F
STREET ADDRESS	10681 REGENT CIRCLE
CITY, ST, ZIP	NAPLES FL 33942
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY, ST, ZIP	

11 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
12 NAME	
13 STREET ADDRESS	
14 CITY, ST, ZIP	
21 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
22 NAME	
23 STREET ADDRESS	
24 CITY, ST, ZIP	
31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
32 NAME	
33 STREET ADDRESS	
34 CITY, ST, ZIP	
41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
42 NAME	
43 STREET ADDRESS	
44 CITY, ST, ZIP	
51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
52 NAME	
53 STREET ADDRESS	
54 CITY, ST, ZIP	
61 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
62 NAME	
63 STREET ADDRESS	
64 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 119.07(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 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 affidavit.

SIGNATURE:

James F. Paradis James F. Paradis *Director* 03/13/95 (813) 566 3825
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Signature (Block 13)