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FILED

Mar 03 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N94000002985 (9)

1. Corporation Name

BUCKINGHAM AIR PARK EAST HOMEOWNERS ASSOCIATION,  
INC.

Principal Place of Business

1625 HENDRY ST.  
SUITE 301  
FT. MYERS FL 33901

Mailing Address

1625 HENDRY ST.  
SUITE 301  
FT. MYERS FL 33901-29693. Date Incorporated or Qualified  
06/16/19943a. Date of Last Report  
04/18/1996

2. Principal Place of Business

21 28 CREEK BLUFF RUN  
Suite, Apt. #, etc.

22

City &amp; State

23 FLAGLER BEACH, FL

24 32136

25 USA

2a. Mailing Address

26 28 CREEK BLUFF RUN  
Suite, Apt. #, etc.

27

City &amp; State

28 FLAGLER BEACH FL

29 32136

30 USA

4. FEI Number

65-0560228

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

CONSOER, GEORGE L JR  
1625 HENDRY ST.  
SUITE 301  
FT. MYERS FL 33901

10. Name and Address of New Registered Agent

81 Name

GEORGE NESMITH

82

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

28 CREEK BLUFF RUN

83

84

City  
FLAGLER BEACH

FL

85 Zip Code  
32136

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 George NesmithGeorge Nesmith

2-27-97

Signature, typed or printed name of registered agent, and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D  
NAME NESMITH, GEORGE  
STREET ADDRESS 8280 PASADENA BLVD.  
CITY-ST-ZIP PEMBROKE PINES FL 33024☐ DELETETITLE D  
NAME CONSOER, GEORGE L JR  
STREET ADDRESS 1625 HENDRY ST.  
CITY-ST-ZIP FT. MYERS FL 33901☒ DELETETITLE D  
NAME ROEDER, MICHAEL E  
STREET ADDRESS 1625 HENDRY ST.  
CITY-ST-ZIP FT. MYERS FL 33901☒ DELETETITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ DELETETITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ DELETETITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P/D  
1.2 NAME George NESMITH  
1.3 STREET ADDRESS 28 CREEK BLUFF RUN  
1.4 CITY-ST-ZIP FLAGLER BEACH, FL 32136☒ Change☐ Addition2.1 TITLE VP/D  
2.2 NAME MALCOLM G. JONES  
2.3 STREET ADDRESS 2332 BOURGOGNE DRIVE  
2.4 CITY-ST-ZIP TALLAHASSEE, FL 32308☐ Change☒ Addition3.1 TITLE S/T/D  
3.2 NAME JOHN H. GREENE  
3.3 STREET ADDRESS 81 BREEZE HILL LANE  
3.4 CITY-ST-ZIP PALM COAST, FL 32137☐ Change☒ Addition4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP☐ Change☐ Addition5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP☐ Change☐ Addition6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP☐ Change☐ Addition

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: George Nesmith  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2-25-97

Date

Daytime Phone # 0055765

CR2E037 (9/96)