## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STAT Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

2/1/96

(813)685-1561

1996

DOCUMENT #
1. Corporation Name

N9400005156 (4)

CAREY RESERVE NORTH HOMEOWNERS ASSOCIATION, INC.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Principal Place	of Business	Mailing Address				ı iddiridi diği balik ülkli dalış dülki	- I radicial die 1911s diest obsit datit datit datit datit datit datit datit dies bind 1964 dies Bill 1665			
3908 26TH ST W. Bradenton Fl 34205		3908 26TH ST W. Bradenton FL 34205								
						3. Date Incorporated or Qualified 10/18/1994		e of Last 5/01/19		
2. Principal Plac	ce of Business	2a. Mailing Address			4. FEI Number 65-0564338		1	oplied For		
21   Suite, Apt. #	ato	26 Suite And # ate				0070504336			lot Applicable	
22	, 810.	Suite, Apt. #, etc.			5. Certificate of Status Desired		•	Additional Required		
City & State		City & State				6. Election Campaign Financing		· ·	May Be	
23		28				Trust Fund Contribution			J lo Fees	
Zip	Country	Zip	Coun	ntry		8. This corporation has liability for in	tangible tax	under s.	199.032,	
24	25					Florida Statutes				
	9. Name and Address of Currer	nt Registered Agent		81	Name	10. Name and Address of New Re	gistered A	gent		
DODACK	IOCEDU		L'	-						
ROBACK, 3908 26T			82 Street Addr		ddress (P.O. Box Number is Not Acceptable	9)				
	TON FL 34205		- t	83						
DIVIDENT	1011 12 04200									
			[4	84	City	<del>-:</del>	FL	<b>85</b> Zig	Code	
or registere	o the provisions of Sections 617.0502 ad agent, or both, in the State of Flori n, and accept the obligations of, Sect	oa. Such change was authorized	, the abov by the co	ve-na orpor	med corp ation's b	poration submits this statement for the purpopard of directors. I hereby accept the appo	ose of chan intreent as r	iging its re egistered	egistered offici agent. I am	
	Signature typed or printed name of registered agent			Agent s	ignature req	uired when reinstating)	DATE			
12.	OFFICERS AN	D DIRECTORS	13.			ADDITIONS/CHANGES TO OFFI				
TITLE	CAREY, WILLIAM O	DEFELE	1.1 111(				€.	] Change	Addition	
NAME STREET ADDRESS	% 3908 26TH ST W.		1.2 NAM		nnarce					
CITY-ST-ZIP	BRADENTON FL 34205		1.3 STR		1					
TITLE	DV	DELETE		1.4 CITY-ST-ZIP 2 1 TITLE				Change	Addition	
NAME	BRADBURY, PAT	_	2 2 NAM				_	<b>.</b>		
STREET ADDRESS	% 3908 26TH ST W.		23 STR	REET AL	DDRESS					
CITY-ST-ZIP	BRADENTON FL 34205		2 4 CIT	TY-ST-	ZIP					
TITLE	DT\$ DELETE		3 1 TITL	3 1 TITLE				] Change	Addition	
NAME	CAREY, GERTRUDE E		32 NAM							
STREET ADDRESS	% 3908 26TH ST W.				DDRESS					
CITY - ST - ZIP	BRADENTON FL 34205	Drutt	34. CH		ZIP			1 Ob	T A same	
TITLE NAME		DELETE	4.1 TITU				L.	] Change	Addition	
STREET ADDRESS			4. 2 NA		DORESS					
CITY-S1-ZIP			4.4 CIT							
TITLE		DELETE	5.1 TITE		Lif		Г	] Change	☐ Addition	
NAME		—	5.2 NAM				_	- •		
STREET ADDRESS					DORESS					
CITY - ST - ZIP			5.4 CIT	Y-\$T-	ZIP					
TIFLE		□DELETE	6.1 TIT	LE				) Change	Addition	
NAME			6.2 NA	ME						
STREET ADDRESS			6.3 STR	REET AI	DDRESS					
CITY-ST-ZIP			6.4 CIT	_	_					
certify that oath; that I	the information indicated on this ann arn an officer or director of the corpo Block 12 or Block 13 if changed, or	ual report or supplemental annua pration or the receiver or trustee (	al report is empowere	s true	and acc	fy for the exemption stated in Section 119.6 urate and that my signature shall have the s this report as required by Chapter 617, Flo	same legal e	ffect as if	made under	