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NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N94000006020 (1)

1. Corporation Name

SAFE NEIGHBORHOOD ASSOCIATION, INC.



Principal Place of Business

Mailing Address

P.O. BOX 10931
TALLAHASSEE FL 32302-3931

P.O. BOX 10931
TALLAHASSEE FL 32302-3931

2. Principal Place of Business

2a. Mailing Address

21 12215 University Blvd

26 12215 University Blvd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 130

27 Suite 130

City & State

City & State

23 Orlando, FL.

28 Orlando, FL.

Zip

Country

Zip

Country

24 32817

25 USA

29 32817

30 USA

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HAUG, ERIC S
101 NO. MONROE
SITE 1090
TALLAHASSEE FL 32301

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 fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY - ST - ZIP

CD WILSON, MONTE E

1621 CHERRY HILL LANE

TALLAHASSEE FL 32312

TITLE NAME STREET ADDRESS CITY - ST - ZIP

PD DONER, V COL

1701 COPPERFIELD CIRCLE

TALLAHASSEE FL 32312

TITLE NAME STREET ADDRESS CITY - ST - ZIP

SVD KLEIN, THOMAS

2900 WHISKERY COURT

TALLAHASSEE FL 32308

TITLE NAME STREET ADDRESS CITY - ST - ZIP

TD SPICCIA, JOSEPH

5367 CARISBROOKE LANE

TALLAHASSEE FL 32308

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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY - ST - ZIP

Wilson, Monte

3380 Summer View Dr.

Alpharetta, Georgia 30302

21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY - ST - ZIP

Doner, Colonel V.

3466 Scout Lake Lane

Orlando, FL. 32765

31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY - ST - ZIP

Spiccia, Joseph

3060 Foxhall Overlook

Roswell, GA. 30075

41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY - ST - ZIP

51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY - ST - ZIP

61 TITLE 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)(k), 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 SIGNING OFFICER OR DIRECTOR

3/28/95 407-365-1300
Date Daytime Phone #

CR2E037 (12/95)