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May 29 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N95000000017 (2)

1. Corporation Name

DUNEDIN BEACH CIVIC ASSOCIATION, INC.

Principal Place of Business

Mailing Address

2530 GARY CIRCLE #402
DUNEDIN FL 346982539 GARY CIRL
#401
DUNEDIN FL 34698
US

2. Principal Place of Business

21 2566 Gary Circle

2a. Mailing Address

26 2566 Gary Circle A-10

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Unit A-10

27 Unit A-10

City & State

City & State

23 Dunedin, FL 34698

28 Dunedin, FL 34698

Zip

Country

Zip

Country

24 34698

25 Pinellas

29 34698

30 Pinellas

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

JONES, CLARENCE
2539 GARY CIRCLE
#401
DUNEDIN FL 34698

81 Name

James Tilges

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

2530 Gary Cir #402

83

84 City

Dunedin

FL

85 Zip Code
34698

11. Pursuant to the provisions of Sections 617.0502 and 617.1506, 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

5-20-97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD Director ☐ DELETE
NAME JONES, CLARENCE
STREET ADDRESS 2539 GARY CIRCLE #401
CITY-ST-ZIP DUNEDIN FL 346981.1 TITLE PD James Tilges ☒ Change ☒ Addition
1.2 NAME 2530 Gary Circle 402
1.3 STREET ADDRESS Dunedin, FL 34698
1.4 CITY-ST-ZIPTITLE VD ☐ DELETE
NAME STONE, MARVIN N
STREET ADDRESS 2589 GARY CIRCLE
CITY-ST-ZIP DUNEDIN FL2.1 TITLE D Patricia Cieskiewicz ☐ Change ☒ Addition
2.2 NAME 9 Forbes #9
2.3 STREET ADDRESS Dunedin FL 34698
2.4 CITY-ST-ZIPTITLE SD ☒ DELETE
NAME ROE, JAMES
STREET ADDRESS 9 FORBES PLACE
CITY-ST-ZIP DUNEDIN FL 346983.1 TITLE D Nancy Holland ☐ Change ☒ Addition
3.2 NAME 2700 Bayshore Blvd.
3.3 STREET ADDRESS Dunedin, FL 34698
3.4 CITY-ST-ZIPTITLE TD ☐ DELETE
NAME KRUMPEL, JOAN
STREET ADDRESS 2570 GARY CIRCLE
CITY-ST-ZIP DUNEDIN FL 346984.1 TITLE D ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIPTITLE D ☐ DELETE
NAME MILLS, TOM
STREET ADDRESS 340 CAUSEWAY BLVD
CITY-ST-ZIP DUNEDIN FL5.1 TITLE SD Irene Georgeades ☐ Change ☒ Addition
5.2 NAME 2530 Gary Circle #705
5.3 STREET ADDRESS Dunedin, FL 34698
5.4 CITY-ST-ZIPTITLE D ☒ DELETE
NAME SCHOLTZ, JOAN
STREET ADDRESS 5 GATESHEAD DRIVE
CITY-ST-ZIP DUNEDIN FL6.1 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:

Signature, typed or printed name of officer or director
Krumpel

4/16/97

813-733-2893

CR2E037 (9/96)