

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 7, 1996.
AMOUNT DUE ON OR BEFORE 8/7/96: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25.)

NONPROFIT
CORPORATION
ANNUAL REPORT

1996-97



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

APPROVED
AND
FILED

97 MAR 31 PM 12:38

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N95000000224 (4)

1. Corporation Name

CENTRAL PARK HISTORIC NEIGHBORHOOD ASSOCIATION,
INC.

Principal Place of Business

241 WALTON BLVD.
WEST PALM BEACH FL 33405

Mailing Address

241 WALTON BLVD.
WEST PALM BEACH FL 33405

3. Date Incorporated or Qualified
01/15/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

4. FEI Number

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

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BLACKERBY, CHERYL
303 CENTRAL DR.
WEST PALM BEACH FL 33405

61 Name

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

63

64 City

FL

65 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 *X Cheryl Blackerby*
Signature, typed or printed name of registered agent and title, if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE

NAME HIGH, RICHARD T II
STREET ADDRESS 241 WALTON BLVD.
CITY-ST-ZIP WEST PALM BEACH FL 33405

1.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME MUCIC, JOAN
STREET ADDRESS 221 LAKELAND DR.
CITY-ST-ZIP WEST PALM BEACH FL 33405

2.1 TITLE ☒ Change ☐ Addition

TITLE ☐ DELETE

NAME BLACKERBY, CHERYL
STREET ADDRESS 303 CENTRAL DR.
CITY-ST-ZIP WEST PALM BEACH FL 33405

2.2 NAME DV MUSHIK, JOANN

TITLE ☐ DELETE

NAME BENNETT, CHRIS
STREET ADDRESS C/O 241 WALTON BLVD.
CITY-ST-ZIP WEST PALM BEACH FL 33405

2.3 STREET ADDRESS 3000002130609--8

TITLE ☐ DELETE

NAME ZERN, WILLIAM R
STREET ADDRESS 205 LAKELAND DR.
CITY-ST-ZIP WEST PALM BEACH FL 33405

2.4 CITY-ST-ZIP -04/01/97--01106--001 Addition

TITLE ☒ DELETE

NAME ADAMS, KEN
STREET ADDRESS 3701 S. OLIVE AVE.
CITY-ST-ZIP WEST PALM BEACH FL 33405

2.5 NAME *****236.25 *****236.25

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

8/1/96 (561)655-7797

CR2E037 (3/96)