

NEW: FILING FEE AFTER MAY 1 IS \$225.00

APPROVED
AND
FILED

95 MAR 10 PM 12:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

100001428061
-03/13/95--01059--007
****130.00 ****130.00

DO NOT WRITE IN THIS SPACE.

3. Date Incorporated or Qualified 02/15/1993	3a. Date of Last Report 06/10/1994
4. FEI Number 65-0390026	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	

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # [REDACTED]
1. Corporation Name
THE CHARLOTTE HARBOR COMMUNITY LEAGUE, INC.

Principal Place of Business
C/O PAUL R. SCHNEIDER
23462 HARPER AVENUE
PUNTA GORDA FL 33980

Mailing Address
C/O PAUL R. SCHNEIDER
23462 HARPER AVENUE
PUNTA GORDA FL 33980

2. Principal Place of Business	2a. Mailing Address
21. Suite, Apt. #, etc.	2b. Suite, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country

9. Name and Address of Current Registered Agent

SCHNEIDER, PAUL R
23462 HARPER AVE.
CHARLOTTE HARBOR FL 33980

10. Name and Address of New Registered Agent

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	
83. City	
84. State	FL

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title of agent.

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	PAUL R. SCHNEIDER,
STREET ADDRESS	23462 HARPER AVENUE
CITY - ST - ZIP	PUNTA GORDA FL 33980
TITLE	VP
NAME	WENDELL CHURCH,
STREET ADDRESS	159 DANFORTH DRIVE
CITY - ST - ZIP	PUNTA GORDA FL
TITLE	ST
NAME	ROSELLA BERGER,
STREET ADDRESS	19265 ABHENRY CIRCLE
CITY - ST - ZIP	PORT CHARLOTTE FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(2)(b), Florida Statutes. I further certify that the information indicated on this principal 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 this corporation or the receiver or trustee empowered to execute this report as required by Chapter 189, 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

2-10-95

Signature of the filer