

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N95000003086 (4)

1. Corporation Name

AERIE 4351 F.O.E. INC.



Principal Place of Business

2236 GRENADIER DRIVE
SUN CITY CENTER FL 33573

Mailing Address

2236 GRENADIER DRIVE
SUN CITY CENTER FL 33573

3. Date Incorporated or Qualified
06/26/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

593299015

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

City & State

City & State

23

28

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

Zip

Country

Zip

Country

24

25

29

30

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

RILEY, ROBERT W
2236 GRENADIER DRIVE
SUN CITY CENTER FL 33573

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 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 P ☐ DELETE

1.1 TITLE ☐ Change ☐ Addition

NAME ROMAGNOLI, VALENTINO
STREET ADDRESS 606 MANATEE
CITY - ST - ZIP RUSKIN FL 33470

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

300001746903

TITLE V ☐ DELETE

2.1 TITLE ☐ Change ☐ Addition

NAME GROVES, JULIAN
STREET ADDRESS 13660 LARAWAY
CITY - ST - ZIP RIVERVIEW FL 33569

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

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TITLE D ☒ DELETE

3.1 TITLE ☐ Change ☒ Addition

NAME FINCH, JACK
STREET ADDRESS 6034 FLORA TERRACE
CITY - ST - ZIP APOLO BEACH FL 33572

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

D GEORGE DOROSKY
105 21ST STREET N.W.
RUSKIN FL 33570

TITLE S ☐ DELETE

4.1 TITLE ☐ Change ☒ Addition

NAME RILEY, ROBERT W
STREET ADDRESS 2236 GRENADIER DRIVE
CITY - ST - ZIP SUN CITY CENTER FL 33573

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

D DONALD RHODES
6521 BIRNIE COURT
APOLLO BEACH FL 33572

TITLE D ☒ DELETE

5.1 TITLE ☐ Change ☒ Addition

NAME CHASE, SCOTT
STREET ADDRESS P.O. BOX 1261 N/A
CITY - ST - ZIP GIBSONTON FL 33534

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

D TONY POWER
1971 HUMSDEN ROAD
BRANDON FL 33511

TITLE ☐ DELETE

6.1 TITLE ☐ Change ☐ Addition

NAME

6.2 NAME

STREET ADDRESS

6.3 STREET ADDRESS

CITY - ST - ZIP

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(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:

ROBERT W. RILEY

Date

813-633-8825

Daytime Phone #

CR2E037 (12/95)

03-18-1996