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Apr 30 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # N95000004944 (3)

1. Corporation Name

BANNER LAKE-GOMEZ COMMUNITY DEVELOPMENT CORPORAT
ION

Principal Place of Business

Mailing Address

8575 S.E. MARS STREET
HOBE SOUND FL 33475

BOX 1229
HOBE SOUND FL 33475-1229
US



3. Date Incorporated or Qualified
10/16/1995

3a. Date of Last Report
03/15/1996

2. Principal Place of Business

2a. Mailing Address

21 Banner Lake Club

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 11318 LANTANA ST

27

City & State

City & State

23 Hobe Sound FL

28

Zip

Country

Zip

Country

24 33455

25 U.S.

29

30

4. FEI Number
65-0625535

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

LOVELY, MARY
8575 S.E. MARS STREET
HOBE SOUND FL 33475

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

Mary Lovely

(NOTE: Registered Agent signature required when reinstalling)

4/16/97

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DT
NAME LOVELY, MARY
STREET ADDRESS 8575 S.E. MARS STREET
CITY-ST-ZIP HOBE SOUND FL

☐ DELETE

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE D
NAME MILLER, ALFRED
STREET ADDRESS 8429 CITRUS WAY
CITY-ST-ZIP HOBE SOUND FL

☐ DELETE

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE DP
NAME MILLER, GAYLE
STREET ADDRESS 8429 CITRUS WAY
CITY-ST-ZIP HOBE SOUND FL

☒ DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☒ Addition

TITLE D
NAME DICKERSON, DAISY
STREET ADDRESS 9092 SANDRIDGE AVENUE
CITY-ST-ZIP HOBE SOUND FL 33455

☒ DELETE

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☒ Addition

TITLE DS
NAME DICKESON, DAISY
STREET ADDRESS 9092 SANDRIDGE AVE
CITY-ST-ZIP HOBE SOUND FL

☐ DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

☐ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☒ Addition

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:

MARY LOVELY

4/16/97

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0044458

CR2E037 (9/96)