FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

PROFIT CORPORATION ANNUAL REPORT



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

1996

P94000087874 (1)

DOCUMENT # P9400087874

1. Corporation Name
FROSTPROOF COMMUNITY DEVELOPMENT, INC.

Principa! Place of Business Mailing Address

2 E WALL ST
FROSTPROOF FL 33843 FROSTPROOF FL 33843



Suite, Apt. #, etc. Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required City & State City & State City & State Fee Required For Application Status Desired Fee Required Fee Required	2 E WALL ST FROSTPROOF FL 33843		2 E WALL ST FROSTPROOF FL (2 E WALL ST FROSTPROOF FL 33843			
2. Marchapi Place of Business 2. Maily Aportess 3. A Fit I Marchapi Place of Status Desired						3. Date incorporated or Qualified 12/05/1994	3a. Date of Last Report 10/30/1995
Sale April 4	2. Principal Pla	ace of Business	2a. Mailing Address				·I
Suite April 4, etc.	21 26					59-3282819	
28	22 27		F			5. Certificate of Status Desired	\$8.75 Additional
Part	City & State		 	& State			
25 28 30		Country	Zφ	Country		8. This corporation has liability for it	
BRIDGEMAN, DAVID L 2 E WALL ST FROSTPROOF FL 33843 83 84 City FL 85 Zp Code 11. Pursuant to the provisions of Sections 607,0002 and 607,1006, Floridal Statutes the above named conscribing statutes the statement for the purpose of changing its registered discorrigination with and accept the obligations of, Section 607,0505, Floridal Statutes the corporation is benefit statuting the approximation are registered agent. I am in the provisions of Sections 607,0002 and 607,1006, Floridal Statutes the above named conscribing statutes the statement for the purpose of changing its registered agent. I am in the provisions of Section 607,0505, Floridal Statutes SIGNATURE SIGNATURE DP OFFICETIS AND DIRECTIONS 12. DP OFFICETIS AND DIRECTIONS 13. ADDITIONS/CHANGES TO OFFICETIS AND DIRECTIONS IN 12 14. This DP STROFT ADDRESS SIGNATURE OFFICETIS AND DIRECTIONS IN 13. ADDITIONS/CHANGES TO OFFICETIS AND DIRECTIONS IN 12 15. THIS ADDITIONS/CHANGES TO OFFICETIS AND DIRECTIONS IN 12 15. THIS ADDITIONS/CHANGES TO OFFICETIS AND DIRECTIONS IN 12 15. THIS ADDITIONS/CHANGES TO OFFICETIS AND DIRECTIONS IN 12 15. THIS ADDITIONS/CHANGES TO OFFICETIS AND DIRECTIONS IN 12 15. THIS ADDITIONS/CHANGES TO OFFICETIS AND DIRECTIONS IN 12 15. THIS ADDITIONS/CHANGES TO OFFICETIS AND DIRECTIONS IN 12 15. THIS ADDITIONS/CHANGES TO OFFICETIS AND DIRECTIONS IN 12 15. THIS ADDITIONS/CHANGES TO OFFICETIS AND DIRECTIONS IN 12 15. THIS ADDITIONS/CHANGES TO OFFICETIS AND DIRECTIONS IN 12 15. THIS ADDITIONS/CHANGES TO OFFICETIS AND DIRECTIONS IN 12 15. THIS ADDITIONS/CHANGES TO OFFICETIS AND DIRECTIONS IN 12 15. THIS ADDITIONS/CHANGES TO OFFICETIS AND DIRECTIONS IN 12 15. THIS ADDITIONS/CHANGES TO OFFICETIS AND DIRECTIONS IN 12 15. THIS ADDITIONS/CHANGES TO OFFICETIS AND DIRECTIONS IN 12 15. THIS ADDITIONS/CHANGES TO OFFICETIS AND DIRECTIONS IN 12 16. THIS ADDITIONS/CHANGES TO OFFICETIS AND DIRECTIONS IN 12 16. THIS ADDITIONS/CHANGES TO OFFICETIS AND DIRECTIONS IN 12 17. THIS ADDITIONS/CHANGES TO OFFICETIS AND THIS ADDITIONS/CHAN	24	<u>L l</u>		30		Florida Statutes	
BRIGGEMAN, DAVID L 2 E WALL ST FROSTPROOF FL 33843 84 Orly FL 85 Zp Code 11. Pursuant to the provisions of Sections 607,0502 and 607,1506, Florida Statutes fire above namood corporation submits this statement for the pursuase of change was authorized by the ecoporation's bload of directors. I hereby accept this appointment as registered agent, or both, in the State of Florida. Such change was authorized by the ecoporation's bload of directors. I hereby accept this appointment as registered agent. I am an accept the objection of 0.000 biological of 0.000 bi		9. Name and Address of C	Current Registered Agent			10. Name and Address of New R	egistered Agent
2 E WALL ST FROSTPROOF FL 33843 8	PDIDGE.	JAN DAVAD I		81	Name		
Record Process Proce	· · · · · · · · · · · · · · · · · · ·				22 Street Address (P.O. Box Number is Not Acceptable)		
11. Pursuant to the provisions of Sections 607.05.02 and 607.1506. Funds Statutes the above named corposation submits his statement for the purpose of changing its registered office annies with, and accept the obligations of State of Florids. Such change was within the statement for the purpose of changing its registered office familiar with, and accept the obligations of Section 90.0505, Florids Statutes SIGNATURE			<u> </u>				
1. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above named consciration submits this statement for the purpose of changing as registered diffice familiar with, and accept the obligations of Section 607.0505, Florida Statutes, the above named consciration submits this statement for the purpose of changing as registered diffice familiar with, and accept the obligations of Section 607.0505, Florida Statutes. SIGNATURE System Specie or protect cancer that prevent port is a submit and protection in the purpose of gent 1 am statement for the corporation is submitted of gent 1 am statement for the corporation is submitted to the corporation is	FNUSIF	NUUR PL 33843		83			
Signature Sign					•		
12. DP	 Pursuant to or registere familiar with 	o the provisions of Sections 607 ed agent, or both, in the State o h, and accept the obligations of	.0502 and 607.1508, Florida Sta f Florida. Such change was auth , Section 607.0505, Florida Statu	itutes, the above-nai orized by the corporates.	ned corporation's boar	ation submits this statement for the purp d of directors. Thereby accept the appo	cose of changing its registered office introduct as registered agent. I am
12. DP	SIGNATURE						
THE				(NOTE Registered Agents	gnature required	when re relating)	DATE
BRIDGEMAN, DAVID L 12 NAME 12		OFFICER OFFICER	~	13.		ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12
SIFET ADDRESS CITY_ST-ZIP	i		L_J DELETE	1. 1 TITLE	i		Change Addition
STREET ADDRESS STRE				1.2 NAME			
Consider	1		•	1.3 STREET AD	DRESS		
WILLIAMS, J. DON					71P		
14 W WALL ST		- 	DELETE	2 1 Till 6			Change Addition
STREET ADDRESS FROSTPROOF FL 33843		•		2.2 NAME			Ì
DELETE D				23 STREET AD	DRESS		
NAME		_	, ~,		np		
STREET ADDRESS 11 PALM AVE N FROSTPROOF FL 33843 33 STREET ADDRESS 34 CRY-ST-ZIP		▼	☐ DELETE	3 1 11716			Change Addition
FROSTPROOF FL 33843 33 SIREET ADDRESS 34 CITY-ST-ZIP	1			3.2 NAME			
Delete				33 STREET AL	DRESS		
DAVIS, EARLY N JR 1430 CROOKED LAKE DR N BABSON PARK FL 33827 TITLE DS MCDONALD, WILLIAM R STREET ADDRESS CITY-ST-ZIP TOLE NAME THOSE THOSE TOCKER, CONNIE STREET ADDRESS CITY-ST-ZIP FROSTPROOF FL 33843 TOCKER, CONNIE 6 2 NAME 6 3 STREET ADDRESS CITY-ST-ZIP FROSTPROOF FL 33843 6 4 CITY-ST-ZIP FROSTPROOF FL 33843		_			16.		
1430 CROOKED LAKE DR N	- 1	· ·	☐ DELETE	1			Change Addition
BABSON PARK FL 33827	1		IR N	4.2 NAME	1		
DELETE				4.3 STREET AD	DRESS	•	
MCDONALD, WILLIAM R 1893 N LAKE REEDY BLVD FROSTPROOF FL 33843 TITLE TUCKER, CONNIE NAME STREET ADDRESS CITY-ST-ZIP TOUCKER, CONNIE STREET ADDRESS CITY-ST-ZIP FROSTPROOF FL 33843 6 3 STREET ADDRESS CITY-ST-ZIP FROSTPROOF FL 33843 6 4 CITY-ST-ZIP					1 <u>P</u>		
1893 N LAKE REEDY BLVD			☐ DELELE				Change Addition
FROSTPROOF FL 33843 53 STREET ADDRESS 54 CITY - ST - ZP			Vn				
TILLE	1			53 STREET AD	DRESS		
NAME TUCKER, CONNIE STREET ADDRESS CITY-ST-ZIP TROSTPROOF FL 33843 TUCKER, CONNIE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP 64 CITY-ST-ZIP		T			P		
SIREET ADDRESS CITY-ST-ZIP 2 E WALL ST FROSTPROOF FL 33843 6 4 CITY-ST-ZIP 6 4 CITY-ST-ZIP		TUCKER CONNIE	□ DETELE				Change Addition
CITY-ST-ZIP FROSTPROOF FL 33843		•			İ		
■ 67 C Y-S -7	i			•	1		
				6 4 CITY - ST - Z	IP .		

4. 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. Ffurther 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 logal 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 607, 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 DIRECT

3/22/96 9+1/635-2244