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FILED

Mar 06 1997 8:00am  
Secretary of State

PROFIT  
CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # **P95000042763 (9)**

1. Corporation Name

**BARCELONA COLLECTION MANAGEMENT CORP.**

Principal Place of Business

**70 PLAYERS CLUB VILLAS  
PONTE VEDRA BEACH FL 32082**

Mailing Address

**70 PLAYERS CLUB VILLAS  
PONTE VEDRA BEACH FL 32082-3117**



2. Principal Place of Business

**21 c/o Jacqueline Salcedo**

Suite, Apt. #, etc.

**22 9855 Regency Sq. Blvd. #351**

City & State

**23 Jacksonville, FL**

Zip

**24 32225**

Country

**25 US**

2a. Mailing Address

**26 c/o Jacqueline Salcedo**

Suite, Apt. #, etc.

**27 P. O. Box 20233**

City & State

**28 Jacksonville, FL**

Zip

**29 32225**

Country

**30 US**

3. Date Incorporated or Qualified

**06/01/1995**

3a. Date of Last Report

**09/04/1996**

4. FEI Number

**59-3330200**

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

**RAX CO.  
% MANOHEY ADAMS & CRISER, P.A.  
50 NORTH LAURA STREET 3400 BARNETT CENTER  
JACKSONVILLE FL**

10. Name and Address of New Registered Agent

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 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 type for printed name of registered agent and the applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **DP  
CORBERA, BERNARD**  
STREET ADDRESS **70 PLAYERS CLUB VILLAS**  
CITY-STATE-ZIP **PONTE VEDRA BEACH FL 32082**

TITLE ☒ DELETE

NAME **D  
WILLIAMS, DENNIS M**  
STREET ADDRESS **80 PLAYERS CLUB VILLAS**  
CITY-STATE-ZIP **PONTE VEDRA BEACH FL 32082**

TITLE ☒ DELETE

NAME **DVP  
FREEMAN, ROBERT D**  
STREET ADDRESS **69 PLAYERS CLUB VILLAS**  
CITY-STATE-ZIP **PONTE VEDRA BEACH FL 32082**

TITLE ☐ DELETE

NAME **D  
ARNALL, JOSEPH H**  
STREET ADDRESS **3RD SOUTH 21ST AVENUE**  
CITY-STATE-ZIP **JACKSONVILLE BEACH FL 32252**

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-STATE-ZIP

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-STATE-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-STATE-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-STATE-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-STATE-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-STATE-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-STATE-ZIP

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

*Bernard Corbera*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

**BERNARD CORBERA**

Date

Daytime Phone #

**2/27/97**

CR2E034 (9/96)