

FILE NOW: FILING FEE IS \$61.25

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Mar 06, 1999 8:00 am
Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 710430

1. Corporation Name
FOUR SEA SUNS CONDOMINIUM, INC.

Principal Place of Business 1800 NE 3RD CT. BOYNTON BEACH FL 33435 US	Mailing Address 2994 JOG ROAD SUITE B GREENACRES FL 33467
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2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified 02/25/1966
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	4. FEI Number 59-1174388
22 City & State	27 City & State	Applied For <input type="checkbox"/> Not Applicable
23 Zip Country	28 Zip Country	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
24	29	30
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent

LENGER, DEWEY
1723 NE 3RD CT #2
SUITE 103
BOYNTON BEACH FL 33435

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

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 *Dewey Lenger* *Dewey Lenger Pres* *2-19-99*
Signature, typed or printed name of registered agent and date if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VP <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	O'RIORDAN, THOMAS	1.2 NAME	D Marcie Dobbie
STREET ADDRESS	309 S CIRCLE CR	1.3 STREET ADDRESS	1720 3rd Ct. #2
CITY-ST-ZIP	BOYNTON BEACH FL 33434	1.4 CITY-ST-ZIP	Boynton Bch, FL 33435
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JOST, JOHN VANDER	2.2 NAME	
STREET ADDRESS	301 SO CIR	2.3 STREET ADDRESS	
CITY-ST-ZIP	BOYNTON BEACH FL 33435	2.4 CITY-ST-ZIP	
TITLE	T <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ZOINO, JOHN	3.2 NAME	
STREET ADDRESS	303 NE 17TH AVE., #203	3.3 STREET ADDRESS	
CITY-ST-ZIP	BOYNTON BEACH FL 33435	3.4 CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PARISEAU, JOHN	4.2 NAME	
STREET ADDRESS	306 SO CIR DR	4.3 STREET ADDRESS	
CITY-ST-ZIP	BOYNTON BEACH FL 33435	4.4 CITY-ST-ZIP	
TITLE	P <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LENGER, DEWEY	5.2 NAME	
STREET ADDRESS	1723 NE 3RD COURT #2	5.3 STREET ADDRESS	
CITY-ST-ZIP	BOYNTON BEACH FL 33435	5.4 CITY-ST-ZIP	
TITLE	S <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CANAVAN, JOHN	6.2 NAME	
STREET ADDRESS	1715 NE 3RD CT. #1	6.3 STREET ADDRESS	
CITY-ST-ZIP	BOYNTON BEACH FL 33435	6.4 CITY-ST-ZIP	

14. I 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, with all other like empowered.

SIGNATURE: *Dewey Lenger* *Dewey Lenger Pres* *2-19-99* *(561)7326692*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (11/98)