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NONPROFIT CORPORATION ANNUAL REPORT **1999**

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 718094

1. Corporation Name
SPANISH TRACE VILLAGE, INC.

Principal Place of Business
1727 MINUTEMEN CAUSEWAY
COCOA BEACH FL 32931

Mailing Address
1727 MINUTEMEN CAUSEWAY
COCOA BEACH FL 32931

2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualified 02/18/1970
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-1446311 ☐ Applied For ☐ Not Applicable
City & State 23	City & State 28	5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
Zip 24 Country 25	Zip 29 Country 30	6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

BROWN, BILL
1729 MINUTEMEN CSWY, #209
#104
COCOA BEACH FL 32931

10. Name and Address of New Registered Agent

81 Name: Space Coast Property Mgmt - Kevin Mattes
82 Street Address (P.O. Box Number is Not Acceptable): 3128 Lake Washington Rd. #170
83
84 City: Melbourne FL 85 Zip Code: 32934

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	☒ DELETE	1.1 TITLE	PD	☐ Change ☒ Addition
NAME	LEE, BILL		1.2 NAME	Dick Schnoor	
STREET ADDRESS	1729 MINUTEMAN CSWY, #210		1.3 STREET ADDRESS	1725 minutemen cswy #201	
CITY-ST-ZIP	COCOA BEACH FL 32931		1.4 CITY-ST-ZIP	Cocoa Beach Fl 32931	
TITLE	DV	☒ DELETE	2.1 TITLE	VPD	☐ Change ☒ Addition
NAME	KRAMER, STANLEY		2.2 NAME	Byron Kelly	
STREET ADDRESS	1727 MINUTEMEN CAUSEWAY, #206		2.3 STREET ADDRESS	1729 minutemen cswy #110	
CITY-ST-ZIP	COCOA BEACH FL		2.4 CITY-ST-ZIP	Cocoa Beach Fl 32931	
TITLE	DS	☒ DELETE	3.1 TITLE	TD	☐ Change ☒ Addition
NAME	THOMPSON, MARGE		3.2 NAME	George Shows	
STREET ADDRESS	1725 MINUTEMEN CAUSEWAY, #202		3.3 STREET ADDRESS	1725 minutemen cswy #105	
CITY-ST-ZIP	COCOA BEACH FL		3.4 CITY-ST-ZIP	Cocoa Beach Fl 32931	
TITLE	DP	☒ DELETE	4.1 TITLE	SD	☐ Change ☒ Addition
NAME	BROWN, BILL		4.2 NAME	Marie Edwards	
STREET ADDRESS	1729 MINUTEMEN CSWY, #209		4.3 STREET ADDRESS	1729 minutemen cswy #208	
CITY-ST-ZIP	COCOA BEACH FL 32931		4.4 CITY-ST-ZIP	Cocoa Beach Fl 32931	
TITLE	DT	☒ DELETE	5.1 TITLE	D	☐ Change ☒ Addition
NAME	FETTERMAN, SHIRLEY		5.2 NAME	Frank Deutsch	
STREET ADDRESS	1725 MINUTEMEN CAUSEWAY, #102		5.3 STREET ADDRESS	1727 minutemen cswy #207	
CITY-ST-ZIP	COCOA BEACH FL		5.4 CITY-ST-ZIP	Cocoa Beach Fl 32931	
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		

CR2E037 (11/98)

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: Dick Schnoor SIGNATURE REQUIRED — 2/24/99 — 407-783-8777
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #