FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT 1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 11 PM 9:46

DOCUMENT # 725472 (5)

1. Corporation Name
COLONNADES CONDOMINIUM ASSOCIATION NO 7 INC

Principal Place of Business	Mailing Address
1140 BAYSHORE DR. FT. PIERCE FL 34949	1140 BAYSHORE DR. FT. PIERCE FL 34949

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/05/1973
3a. Date of Last Report: 04/22/1994
4. FEI Number: 59-1579478 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business (21)
2a. Mailing Address (26)
Suite, Apt. #, etc. (22) (27)
City & State (23) (28)
Zip (24) Country (25) Zip (29) Country (30)

5. Certificate of Status Desired ☐ $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

WRATHER, FRED
1172 COMMODORE CT #206
FT PIERCE FL 34949

10. Name and Address of New Registered Agent

81 Name: KLEIN, DONALD G.
82 Street Address (P.O. Box Number is Not Acceptable): 1151 CARLTON CT #101
83
84 City: FT PIERCE FL 85 Zip Code: 34949

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: Donald G. Klein, Pres. 3-6-95
Signature, typed or printed name of Registered Agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D	1.1 TITLE	DT	☒ Change ☐ Addition
NAME	CHIEFFO, MARY	1.2 NAME	VYMOLA, WILLIAM	
STREET ADDRESS	1151 CARLTON CT., APT. 202	1.3 STREET ADDRESS	1172 Commodore Ct #205	
CITY-ST-ZIP	FT PIERCE, FL 00000	1.4 CITY-ST-ZIP	FT PIERCE FL	
TITLE	DS	2.1 TITLE		☐ Change ☐ Addition
NAME	SENFT, HELEN	2.2 NAME		
STREET ADDRESS	1151 CARLTON CT, APT 102	2.3 STREET ADDRESS		
CITY-ST-ZIP	FT PIERCE, FL 00000	2.4 CITY-ST-ZIP		
TITLE	D	3.1 TITLE		☐ Change ☐ Addition
NAME	SINCLAIR, ROBERT	3.2 NAME		
STREET ADDRESS	1172 COMMODORE CT, APT 105	3.3 STREET ADDRESS		
CITY-ST-ZIP	FT PIERCE, FL 00000	3.4 CITY-ST-ZIP		
TITLE	D	4.1 TITLE		☐ Change ☐ Addition
NAME	LANIER, JAMES	4.2 NAME		
STREET ADDRESS	1172 COMMODORE CT #101	4.3 STREET ADDRESS		
CITY-ST-ZIP	FT PIERCE FL	4.4 CITY-ST-ZIP		
TITLE	D	5.1 TITLE		☐ Change ☐ Addition
NAME	WOODS, GLEN	5.2 NAME		
STREET ADDRESS	1172 COMMODORE CT., APT. 102	5.3 STREET ADDRESS		
CITY-ST-ZIP	FT PIERCE, FL 00000	5.4 CITY-ST-ZIP		
TITLE		6.1 TITLE	D	☐ Change ☒ Addition
NAME		6.2 NAME	SENFT, WILLIAM	
STREET ADDRESS		6.3 STREET ADDRESS	1151 CARLTON CT #102	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	FT PIERCE FL	

14. 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)(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: Donald G. Klein Pres 3-6-95 407-466-5799
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Donald G. Klein

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