FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

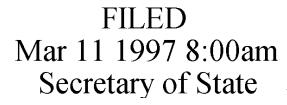
DOCUMENT # 726851

(9)

OCEAN PALM VILLAS SOUTH CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address





16 OCEAN PALM Fligher Beach I			BS OCEAN PALM VILLAS S FLGLER BEACH FL 32136-4201								
						3	3. Date Incorporated or Qualified 07/03/1973 05			te of Last Report 5/01/1996	
•	lace of Business	2a. Mailing	2a. Mailing Address			4	. FEI Number	449	k	A	pplied For
21		26					59-1559	14/			lot Applicable
Suite, Apt. #, etc.		Suite, A	Suite, Apt. #, etc.			5	h Contingto of Statue Begins				Additional lequired
City & Stat	e	City & S	late			6	. Election Cam	paign Financing		\$5.00	May Be
23		28					Trust Fund C	ontribution		Added	to Fees
Zip	Country	Zip		country	!	8	. This corporat	ion has liability for			s. 199.032,
24	25	29	30				Florida Statut		Yes L		
	9. Name and Address of	Current Registered Ag	ent	81	Name	10). Name and A	ddress of New Re	gistered	Agent	
				"	Name						
KAISER, .		•		82	Street	Address (P.O. Box Numb	er is Not Acceptat	ble)		
	n palm villas south										
FLGLER E	BEACH FL 32136			83	ŀ						
				84	City					85 Zip	Code
		_							FL		
office or i agent. I a	to the provisions of Sections 6 registered agent, or both, in the am familiar with, and accept the	e State of Florida, Such e obligations of, Section	change was author 617.0503, Florida S	abov ized by Statute	e-named y the cor s.	corporation's	on submits this board of direct	statement for the ports. I hereby accept	purpose of pt the app	cnanging ointment a	its registered s registered
SIGNATURE	Signature, typed or printed name of regis	stered agent and title if applicable	(NOTE: Regis	lered Ag	ant signature	e required whe	en reinstaling)		DATE		
12.	OFFICE	RS AND DIRECTORS		3.		.,	ADDITIONS/C	HANGES TO OFFIC	CERS AND	DIRECTO	RS IN 12
TITLE	DT		DELETE 1	1 TITLE		Tal			· · · · · · · · · · · · · · · · · · ·	Change	Addition Addition
NAME	FORD, LOUISE	,	1	2 NAME		Lahr	Gagno	h	_		-
STREET ADDRESS	34 OCEAN PALM VILLAS	SOUTH	1	3 STREE	ADDRESS	70 0	Ocean Pa	Im Villas ?	5.		
CITY-ST-ZIP	FLGLER BEACH FL			4 CITY-5		Flag			3013	L)	
TITLE	DSV			1 TITLE		رما				Change	Addition Addition
NAME	MCKEON, TIMOTHY		2	2 NAME		Dan	ald Kobe	۲	_		
STREET ADDRESS	57 OCEAN PALM VILLAS	SOUTH	2	3 STREE	ADDRESS			m Villas	S		
C(TY-ST-ZIP	FLGLER BEACH FL		2	4 CITY-	ST-7IP	Floa			2136		
TITLE	D	· · · · · · · · · · · · · · · · · · ·		1 TITLE	*. *	1 124				Change	Addition
NAME	PELSANG, ELMER		3	.2 NAME		1					
STREET ADDRESS	52 OCEAN PALM VILLAS	S	3	3 STREE	ADDRESS	1					
CITY-ST-ZIP	FLGLER BCH, FL 00000		3	4. CITY-	\$1 - 7IP						
TITLE	D			1 TITLE						☐ Change	Addition
NAME	SCHUETTLER, GUENTER	ì	4	2 NAME							
STREET ADDRESS	6 OCEAN PALM VILLAS		4	.3 STAEE	ADDRESS	1					
CITY-ST-ZIP	FLGLER BEACH FL		4	4 CITY-	ST - 71P						
TITLE			_	.1 TITLE		1		······		☐ Change	Addition
NAME			5	.2 NAME							
STREET ADDRESS					T ADDRESS						
CITY - ST - ZIP	}		L.	.4 CITY-:		}					
TITLE				1 TITLE	NII	 				Change	Addition
NAME		'		.2 NAME							
					T ADORESS						
STREET ADDRESS						1					
CITY-ST-ZIP	by certify that the information	cumplied with this filing		4 CITY-		etated in S	Paction 110 07/	9Vi) Florida Statuta	ec I furtho	r cortifu the	u tha

Information indicated the information supplies with this sting goes not quality in the exemption stated in section 113 and accurate a not 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: