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

APPROVED AND FILED
9 MAY -1 AM 8:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **728794** **(9)**

1. Corporation Name
CAYMAN CAY VILLAS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
P O 1541 HOLMES BEACH FL 34218	P O 1541 HOLMES BEACH FL 34218

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **02/11/1974**
3a. Date of Last Report: **04/14/1994**
4. FEI Number: **NOT APPLICABLE** ☐ 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
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 § 199.032, Florida Statutes ☐ Yes ☒ No

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

9. Name and Address of Current Registered Agent

O'BANNON, SUSAN
4307 GULF DR. #108
HOLMES BCH. FL 34217

10. Name and Address of New Registered Agent

31 Name
32 Street Address (P.O. Box Number is Not Acceptable)
33
34 City **FL** 35 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: Susan J. O'Bannon (Signature of a current or former registered agent required for change) (NOTE: Registered Agent signature required when name changes) DATE: 4-27-95

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD	11 TITLE	☐ Change ☐ Addition
NAME	MCDONALD, TERRY	12 NAME	
STREET ADDRESS	1460 GOLFVIEW DR.	13 STREET ADDRESS	
CITY ST ZIP	AVON PARK FL	14 CITY ST ZIP	
TITLE	TM	21 TITLE	☐ Change ☐ Addition
NAME	O'BANNON, SUSAN	22 NAME	
STREET ADDRESS	4307 GULF DR #108	23 STREET ADDRESS	
CITY ST ZIP	HOLMES BEACH, FL 00000	24 CITY ST ZIP	
TITLE	SD	31 TITLE	☑ Change ☐ Addition
NAME	EARLY, JANE	32 NAME	SD Dorcas A. Toth
STREET ADDRESS	4307 GULF DRIVE #101	33 STREET ADDRESS	3028 Cascade Drive
CITY ST ZIP	HOLMES BEACH FL	34 CITY ST ZIP	Clearwater, FL 34621
TITLE	PD	41 TITLE	☐ Change ☐ Addition
NAME	JONES, ROY	42 NAME	
STREET ADDRESS	4307 GULF DR., #209	43 STREET ADDRESS	
CITY ST ZIP	HOLMES BEACH FL	44 CITY ST ZIP	
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	
CITY ST ZIP		54 CITY ST ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY ST ZIP		64 CITY ST ZIP	

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: Susan J. O'Bannon (SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR) 4-27-95 (Date) 813 361-5849 (Daytime Phone #)
Susan J. O'Bannon

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