

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 734431 (0)

1. Corporation Name

OCEAN TRAIL CONDOMINIUM ASSOCIATION NO. 1, INC.



Principal Place of Business

**200 CEAN TRAIL WAY. #200
JUPITER FL 33477**

Mailing Address

**200 CEAN TRAIL WAY. #200
JUPITER FL 33477**

3. Date Incorporated or Qualified
11/25/1975

3a. Date of Last Report
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip Country

29 Zip Country

4. FEI Number

59-1721857

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**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**WEBER, SHARON A., ESQ.
% BECKER, POLIAKOFF & STREITFELD, P.A.
450 AUSTRALIAN AVE., STE. 720
W.PALM BCH. FL 33401-2034**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **VP - President** ☐ DELETE
NAME **ARMSTRONG, JACK**
STREET ADDRESS **200 OCEAN TRL WAY #304**
CITY-ST-ZIP **JUPITER FL**

TITLE **D** ☐ DELETE
NAME **GOLUB, AL**
STREET ADDRESS **200 OCEAN TRAIL WAY #PH3**
CITY-ST-ZIP **JUPITER, FL 00000**

TITLE **D** ☐ DELETE
NAME **ZUCCARO, VINCE**
STREET ADDRESS **200 OCEAN TRAIL WAY #807**
CITY-ST-ZIP **JUPITER, FL 00000**

TITLE **D** ☒ DELETE
NAME **MCDONNELL, ANITA**
STREET ADDRESS **200 OCEAN TRAIL WAY, #408**
CITY-ST-ZIP **JUPITER FL**

TITLE **ST** ☐ DELETE
NAME **BOGGS, HUBERT**
STREET ADDRESS **200 OCEAN TRL WAY #402**
CITY-ST-ZIP **JUPITER, FL 00000**

TITLE **D** ☒ DELETE
NAME **MEARS, GERALD**
STREET ADDRESS **200 OCEAN TRAIL WAY #PH8**
CITY-ST-ZIP **JUPITER, FL 00000**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **VP** ☐ Change ☒ Addition
1.2 NAME **Jeanne Taylor**
1.3 STREET ADDRESS **200 Ocean Trail Way #709**
1.4 CITY-ST-ZIP **Jupiter, FL 33477** ☐ Change ☒ Addition

2.1 TITLE **Director** ☐ Change ☒ Addition
2.2 NAME **Leon Oberacker**
2.3 STREET ADDRESS **200 Ocean trail Way #805**
2.4 CITY-ST-ZIP **Jupiter, FL 33477** ☐ Change ☐ Addition

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 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)(k), 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: Jack Armstrong, Pres. March 14, 1996 747-1970
(407)
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone

CR2E037 (12/95)