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Secretary of State

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**NONPROFIT
CORPORATION
ANNUAL REPORT
1999**



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

DOCUMENT # 734431

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



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified
11/25/1975

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

4. FEI Number
59-1721857

Applied For
☒ Not Applicable

22 City & State

27 City & State

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

23 Zip

Country

28 Zip

Country

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RITCHEY, DOUG
200 OCEAN TRAIL WAY
SUITE 105
JUPITER FL 33477

81 Name **Steve Ingus Bristol Management**
82 Street Address (P.O. Box Number is Not Acceptable)
103 S. US 1 Suite F5-135
83
84 City **Jupiter** FL 85 Zip Code **33477**

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 date if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

3-15-99

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME **PD**
STREET ADDRESS **TAYLOR, JEANNE**
CITY-ST-ZIP **200 OCEAN TRAIL WAY, #709**
JUPITER FL

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE ☒ DELETE
NAME **D**
STREET ADDRESS **GRIEB, MARY**
CITY-ST-ZIP **200 OCEAN TRAIL WAY, #505**
JUPITER, FL 00000

2.1 TITLE ☐ Change ☒ Addition
2.2 NAME **JOHN RENBLER**
2.3 STREET ADDRESS **200 Ocean Trail Way #610**
2.4 CITY-ST-ZIP **JUPITER, FL 33477**

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

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

TITLE ☐ DELETE
NAME **D**
STREET ADDRESS **PANZICA, SAM**
CITY-ST-ZIP **200 OCEAN TRL WAY, SUITE 706**
JUPITER FL 33477

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

TITLE ☐ DELETE
NAME **D**
STREET ADDRESS **STROM, GEORGE**
CITY-ST-ZIP **200 OCEAN TRL WAY, SUITE 301**
JUPITER, FL 00000 33477

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

TITLE ☐ DELETE
NAME **D**
STREET ADDRESS **ABESS, JOAN**
CITY-ST-ZIP **200 OCEAN TRAIL WAY, #101**
JUPITER FL

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

3-11-99

CR2E037 (11/98)