

FILE NOW: FILING FEE IS \$61.25

FILED  
Apr 23 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
---	---	---

**DOCUMENT # 740585 (5)**  
1. Corporation Name  
**RUNAWAY BAY CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business <b>1801 NORTH GULF DR BRADENTON FL 34217 US</b>	Mailing Address <b>P.O. BOX 10674 BRADENTON FL 34282 US</b>
--	--

3. Date Incorporated or Qualified <b>10/21/1977</b>		
4. FEI Number <b>59-1799124</b>	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>

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

5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
7. Is this nonprofit corporation a homeowners association? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent  
**C & S CONDOMINIUM MANAGEMENT SERVICES  
4301 32ND ST. W.  
STE. C7  
BRADENTON FL 34208**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE	PD	<input type="checkbox"/> DELETE
NAME	WALKER, LEWIS	
STREET ADDRESS	1801 NORTH GULF DR., UNIT 184	
CITY-ST-ZIP	BRADENTON BEACH FL	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	RODRIGUEZ, JOSE	
STREET ADDRESS	1801 GULF DR NO #212	
CITY-ST-ZIP	BRADENTON BEACH FL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	MCGRATH, FRANK	
STREET ADDRESS	1705 SHERWIN	
CITY-ST-ZIP	CHICAGO IL	
TITLE	VPD	<input type="checkbox"/> DELETE
NAME	BAUM, BETTY	
STREET ADDRESS	1801 GULF DR. N., #202	
CITY-ST-ZIP	BRADENTON BEACH FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	KAPASSER, LARRY	
STREET ADDRESS	1801 GULF DR. N.	
CITY-ST-ZIP	BRADENTON BEACH FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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.

SIGNATURE: *Sandra Walker (President) Lewis Walker* 4-15-98

CR2E037 (10/97)