


**2008 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT**

**FILED**  
**Mar 24, 2008 8:00 am**  
**Secretary of State**

03-24-2008 90076 018 \*\*\*\*61.25

**DOCUMENT # 740585**  
 1. Entity Name  
**RUNAWAY BAY CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business  
**1801 NORTH GULF DR  
 BRADENTON, FL 34217 US**

Mailing Address  
**4301 32ND STREET WEST  
 A-20  
 BRADENTON, FL 34205 US**


2. Principal Place of Business - No P.O. Box #  
 Suite, Apt. #, etc.

3. Mailing Address  
 Suite, Apt. #, etc.

City & State

Zip Country Zip Country

**50001459**



01262008 Chg-NP CR2E037 (12/06)

4. FEI Number  
**59-1799124**

Applied For  
 Not Applicable

5. Certificate of Status Desired  **\$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent  
**C & S CONDOMINIUM MANAGEMENT SERVICES  
 4301 32ND ST. W.  
 STE A19  
 BRADENTON, FL 34208**

7. Name and Address of New Registered Agent

Name

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

City **FL** Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reappointing)

DATE \_\_\_\_\_

**Filing Fee is \$61.25 Due by May 1, 2008**

9. Election Campaign Financing Trust Fund Contribution.  **\$5.00** May Be Added to Fees

Make check payable to **Florida Department of State**

10. OFFICERS AND DIRECTORS				11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10			
TITLE	P	<input checked="" type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	HINELINE, JACK			NAME			
STREET ADDRESS	1801 N GULF DRIVE #203			STREET ADDRESS			
CITY-ST-ZIP	BRADENTON BEACH, FL 34217			CITY-ST-ZIP			
TITLE	D	<input checked="" type="checkbox"/> Delete		TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	SAVINO, FRANK			NAME			
STREET ADDRESS	987 LONE PINE CT			STREET ADDRESS			
CITY-ST-ZIP	AMERY, WI 54001			CITY-ST-ZIP			
TITLE	D	<input type="checkbox"/> Delete		TITLE	President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BUNJO, RUSS			NAME			
STREET ADDRESS	1801 N GULF DR #244			STREET ADDRESS			
CITY-ST-ZIP	BRADENTON BEACH, FL 34217			CITY-ST-ZIP			
TITLE	SD	<input type="checkbox"/> Delete		TITLE	Secretary	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	KAPPESEAR, LARRY			NAME			
STREET ADDRESS	71 DENNISON DR			STREET ADDRESS			
CITY-ST-ZIP	GLENDAL HEIGHTS, IL 60139			CITY-ST-ZIP			
TITLE	T	<input type="checkbox"/> Delete		TITLE	Vice President	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition	
NAME	BARTON, MICHAEL			NAME			
STREET ADDRESS	PO BOX 343			STREET ADDRESS			
CITY-ST-ZIP	BRADENTON BEACH, FL 34217			CITY-ST-ZIP			
TITLE		<input type="checkbox"/> Delete		TITLE	Treasurer	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition	
NAME				NAME	Brian Appleyard		
STREET ADDRESS				STREET ADDRESS	The Barn Low Lane Calcot		
CITY-ST-ZIP				CITY-ST-ZIP	Reading Berks 4X RG317RT		

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 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 # \_\_\_\_\_