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Mar 05 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 741183 (8)

1. Corporation Name

SEA PALMS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

3200 N. A1A
FT. PIERCE FL 34949

3200 N. A1A
FT. PIERCE FL 34949-8872

3. Date Incorporated or Qualified
12/22/1977

3a. Date of Last Report
04/16/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number
59-1870269

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

FLYNN, EDMUND
3200 N. A1A #604
FT. PIERCE FL 34949

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE VP ☐ DELETE

NAME TAGGART, JOHN
STREET ADDRESS 3200 N. A1A #604
CITY-ST-ZIP FT. PIERCE FL 34949

TITLE D ☐ DELETE

NAME REEDER, JOHN
STREET ADDRESS 3200 N. A1A #907
CITY-ST-ZIP FT. PIERCE FL 34949

TITLE P ☐ DELETE

NAME FLYNN, EDMUND
STREET ADDRESS 3200 N. A1A #604
CITY-ST-ZIP FT. PIERCE FL 34949

TITLE D ☐ DELETE

NAME SINCERBEAUX, JOHN
STREET ADDRESS 3200 N A1A #209
CITY-ST-ZIP FT PIERCE FL 34949

TITLE S ☐ DELETE

NAME MORRISSEY, JIM
STREET ADDRESS 3200 N A1A 707
CITY-ST-ZIP FT PIERCE FL 34949

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE ☐ Change ☒ Addition

1.2 NAME George Hoffer
1.3 STREET ADDRESS 3200 N. A1A #607
1.4 CITY-ST-ZIP Ft. Pierce, FL. 34949

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME William Moore
2.3 STREET ADDRESS 3200 N. A1A #102
2.4 CITY-ST-ZIP Ft. Pierce, FL. 34949

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 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: *John Sincerbeaux* REQUIRED JOHN SINCERBEAUX 2/4/97

CR2E037 (9/96)