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Mar 26 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **745162** (8)

1. Corporation Name

**BAYSHORE ON THE LAKE CONDOMINIUM APARTMENTS, PHA
SE II, OWNERS ASSOCIATION, INC.**

Principal Place of Business

Mailing Address

**3519 LAKE BAYSHORE DRIVE
BRADENTON FL 32405**

**3519 LAKE BAYSHORE DRIVE
BRADENTON FL 32405**

3. Date Incorporated or Qualified

12/07/1978

4. FEI Number

59-1957373

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

5. Certificate of Status Desired ☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution ☐

**\$5.00 May Be
Added to Fees**

7. Is this nonprofit corporation a homeowners association?
☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CONDO KEEPERS
630 S ORANGE AVE, STE 102
SARASOTA FL 34236**

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	D	<input checked="" type="checkbox"/> DELETE
NAME	ASPINALL, WILLIAM	
STREET ADDRESS	3552 LAKE BAYSHORE DR	
CITY-ST-ZIP	BRADENTON FL	
TITLE	DP	<input checked="" type="checkbox"/> DELETE
NAME	CANNETO, MARY JEAN	
STREET ADDRESS	3520 LAKE BAYSHORE DR	
CITY-ST-ZIP	BRADENTON FL	
TITLE	DS	<input checked="" type="checkbox"/> DELETE
NAME	VORENKAMP, EDWARD	
STREET ADDRESS	3614 LAKE BAYSHORE DR	
CITY-ST-ZIP	BRADENTON FL	
TITLE	DIRECTOR	<input type="checkbox"/> DELETE
NAME	BUTTA, DAVID	
STREET ADDRESS	3754 LAKE BAYSHORE DRIVE	
CITY-ST-ZIP	BRADENTON FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	LAWSON, FRANK	
STREET ADDRESS	3618 LAKE BAYSHORE DR	
CITY-ST-ZIP	BRADENTON FL	
TITLE	DT	<input type="checkbox"/> DELETE
NAME	BONDY, WILLIAM	
STREET ADDRESS	3521 LAKE BAYSHORE DR	
CITY-ST-ZIP	BRADENTON FL	

1.1 TITLE	President	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	BETJEMANN, HENRY	
1.3 STREET ADDRESS	3599 LAKE BAYSHORE DR.	
1.4 CITY-ST-ZIP	BRADENTON, FL 34205	
2.1 TITLE	VICE PRESIDENT	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	KLAPSCHINSKI, HANS	
2.3 STREET ADDRESS	3667 LAKE BAYSHORE DR.	
2.4 CITY-ST-ZIP	BRADENTON, FL 34205	
3.1 TITLE	SECRETARY	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	YODER, ELIZABETH	
3.3 STREET ADDRESS	3821 LAKE BAYSHORE DR.	
3.4 CITY-ST-ZIP	BRADENTON, FL 34205	
4.1 TITLE	DIRECTOR	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	NARRAMORE, BETTY	
4.3 STREET ADDRESS	3587 LAKE BAYSHORE DR.	
4.4 CITY-ST-ZIP	BRADENTON, FL 34205	
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: *Hans Klapschinski* 3/19/98

CR2E037 (10/97)