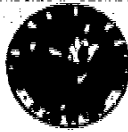


FILE NOW: FILING FEE AFTER MAY 1 IS \$165.00

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 APR 24 AM 8:32

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # 747223 (6)

1. Corporation Name

850 BEACH ROAD CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

**1 TURTLE BEACH ROAD
VERO BEACH FL 32963**

**1 TURTLE BEACH ROAD
VERO BEACH FL 32963**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

05/16/1979

3a. Date of Last Report

04/21/1994

4. FEI Number

59-2027423

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**

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☐

**\$68.75 Supplemental
Fee Not Required**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☒ Yes

☐ No

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ROSE, MICHAEL L.
1 TURTLE BEACH ROAD
INDIAN RIVER SHORES FL**

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when re-registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE TD
NAME PLANT, EDWARD T.
STREET ADDRESS #178-850 BEACH ROAD
CITY - ST - ZIP VERO BEACH FL

TITLE D
NAME RAUTH, J. DONALD
STREET ADDRESS 175 850 BEACH ROAD
CITY - ST - ZIP VERO BCH. FL

TITLE VP
NAME DAUNER, LOUIS
STREET ADDRESS 277 850 BEACH RD.
CITY - ST - ZIP VERO BEACH FL

TITLE DP
NAME JONES, JOSEPH
STREET ADDRESS 279 850 BEACH ROAD
CITY - ST - ZIP VERO BCH. FL

TITLE AS
NAME ROSE, MICHAEL L.
STREET ADDRESS 1 TURTLE BEACH ROAD
CITY - ST - ZIP VERO BEACH FL

TITLE D
NAME PLETTNER, WILLIAM F.
STREET ADDRESS 280 850 BEACH RD
CITY - ST - ZIP VERO BEACH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

☐ Change ☐ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

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

☐ Change ☐ Addition

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Michael L. Rose

4/17/95

407-231-1666

(date)

(telephone number)