

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Apr 23, 1999 8:00 am
Secretary of State

04-23-1999 90118 026 ****61.25

DOCUMENT # 747223

1. Corporation Name

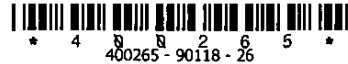
850 BEACH ROAD CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

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

Mailing Address

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



2. Principal Place of Business

21
Suite, Apt. #, etc.

2a. Mailing Address

26
Suite, Apt. #, etc.

3. Date Incorporated or Qualified

05/16/1979

4. FEI Number

59-2027423

Applied For
Not Applicable

23 City & State

27 City & State

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

24 Zip

25 Country

29 Zip

30 Country

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

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

10. Name and Address of New Registered Agent

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

TITLE **TD** ☐ DELETE
NAME **PLANT, EDWARD T.**
STREET ADDRESS **#176-850 BEACH ROAD**
CITY-ST-ZIP **VERO BEACH FL**

TITLE **D** ☐ DELETE
NAME **BARKER, JOHN E.**
STREET ADDRESS **1 TURTLE BEACH ROAD**
CITY-ST-ZIP **VERO BCH. FL**

TITLE **VP** ☐ DELETE
NAME **PLETTNER, WILLIAM F**
STREET ADDRESS **850 BEACH ROAD #280**
CITY-ST-ZIP **VERO BEACH FL**

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

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

TITLE **D** ☐ DELETE
NAME **RAUTH, J D**
STREET ADDRESS **850 BEACH ROAD #175**
CITY-ST-ZIP **VERO BEACH FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME **S BARKER, JOHN E.**
2.3 STREET ADDRESS **1 TURTLE BEACH ROAD**
2.4 CITY-ST-ZIP **VERO BEACH, FL 32963**

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME **VD PLETTNER, WILLIAM F.**
3.3 STREET ADDRESS **850 BEACH ROAD #377**
3.4 CITY-ST-ZIP **VERO BEACH, FL. 32963**

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 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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Michael Rose

April 16, 1999

(561)231-1666

Date

Daytime Phone #

0021463

CR2E037 (11/98)