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 Mar 17, 1999 8:00 am § Secretary of State

03-17-1999 90086 041 ****61.25

3. Date Incorporated or Qualifed

06/29/1979

4. FEI Number

DOCUMENT # 747886

1. Corporation Name

MANATEE BAY CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

2a. Mailing Address

Suite, Apt. #, etc.

26

4423 COUNTRY CLUB BLVD #C6

2. Principal Place of Business

Suite, Apt. #, etc.

3 COUNTRY CLUB BLVD #C6 E CORAL FL 33904	4423 COUNTRY CLUB BLVD #C6 CAPE CORAL FL 33904	
		· · · · · · · · · · · · · · · · · · ·

22]		27			59-203447	Not	Applicable		
City & Stat	e	City & State							\$8.75 A	ditional
23	_	28				5. Certifcate of S	Status Desired		Fee Red	uired
Zip	Country	Zip	Cou	intry		6. Election Cam	paign Financing		\$5.00	- √ay Be
24	25	29 30				Trust Fund Co	ontribution		Added to	
	9. Name and Address of Current	Registered Agent				10. Name and A	ddress of New R	Registered .	Agent	
				81	Name					
BECKER & POLIAKOFF , P.A. THE COLONNADES 13515 BELL TOWER DR STE 101				82	Street Addres	ss (P.O. Box Numb	er is Not Accepta	ble)		
				83						
	S FL 33907			B4 (City				85 Zip C	ode
				FL 85 Zip Code						
11. Pursuant	to the provisions of Sections 617.0502	and 617.1508, Florida	Statutes, the a	bove-r	named corpor	ration submits this	statement for the	purpose of	changing its	egistered
office or r	egistered agent, or both, in the State of m familiar with, and accept the obligation	Fiorida, Such change ins of, Section 617.05	e was autnorized i03, Florida Stat	ם בע נחי utes.	e corporation	is board of director	s. Thereby accep	v nie abboli	milent as 165	1010100
SIGNATURE	,	•								
SIGNATURE	Signature, typed or printed name of registered agent a	nd title if applicable.	(NOTE: Registered	i Agent si	ignature required			DATE		50.01.40
12.	OFFICERS AND		13.		1		HANGES TO OF	FICERS AN		
TITLE	VP	[] DEI	.ETE 1.1 Ti	TLE		ECTOR -	Trong at 1		☐ Change	Addition
NAME	THEODORE J GLANDING		1.2 N	AME	Bur	RTON FEINS R3 COUNTRY	ALUA BLY	10 C-L		
STREET ADORESS	4417 COUNTRY CLUB BLVD		1.3 S	TREET AL	ODRESS 444	23 COUNTRY	36.			
CITY-ST-ZIP	CAPE CORAL, FL 00000		1.4 C	ITY-ST-Z	IP CA	pe Conni,	FC 3890	7		
TITLE	PD	☐ DEI	.ETE 2.1 T	TLE]				Change	☐ Addition
NAME	DOYLE, JAMES		2.2 N	AME						
STREET ADDRESS	4411 COUNTRY CLUB RD		2.3 \$	TREET AL	DORESS					
CITY-ST-ZIP	CAPE CORAL, FL 00000			TY-ST-	ZIP -					
TITLE	STD	☐ DEI	.ETE 3.1 TI	TLE					Change	☐ Addition
NAME	SHANEYFELT, RUSSELL		3.2 N	AME	Į					
STREET ADDRESS	4423 COUNTRY CLUB BLVD		3.3 S	TREET AL	DORESS					
CITY-ST-ZIP	CAPE CORAL FL		3.4. 0	TY-ST-	ZIP					
TITLE	D	☐ DEI	.ETE 4.1 T	TLE			•		Change	☐ Addition
NAME	ROLEKE, JAMES		4.21	IAME						
STREET ADDRESS	4423 COUNTRY CLUB BLVD		4.3 S	TREET AL	DORESS					
CITY-ST-ZIP	CAPE CORAL, FL 00000			ITY-ST-Z	ZIP					
TITLE		☐ DE							Change	☐ Addition
NAME			5.2 N	AME	1					
STREET ADDRESS	·		5.3 S	TREETAL	DDRESS					
CITY-ST-ZIP				ITY-ST-Z	ÜP					
TITLE : 1500		C DE	ETE 6.1 T	TLE					Change	☐ Addition
NAME) P(€ 35	7 30/3/8 S# 3/0 300		6.2 N	AME						
STREET ADDRESS	NAME OF THE PARTY		6.3 S	TREET A	DDRESS					
CITY-ST-ZIP 3.5	18776 Jan 184			ЛY-ST-Z						
44 Charabit	cortify that the information supplied with	this filing doos not a	ralify for the ave	metion	ctated in Sc	oction 119 07(3)(i)	Florida Statutes	I further cor	tifu that the in	formation

indicated on this annual report or supplied with any similar poor to 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 cath; 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 chapted, or on an attachment with an address, with all other like empowered.

TIRRUSSELL L. SHAUEYFELT, SE.

941-549-0681 3-18-99

Applied For