NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## **DOCUMENT # 749801**

1. Corporation Name

## WOOD STREET CONDOMINIUM ASSOCIATION, INC.

## **FILED** Mar 02, 1999 8:00 am § Secretary of State

03-02-1999 90093 030 \*\*\*\*61.25

Principal Place of Business   Mailling Address   1801 GLENGARY STREET   1802 GLENGARY STREET   1801 GLENGARY STREET   1802 GLENGARY STREET   1801 GLENGARY STREET   1802 GLENGARY STR
SARASOTA FL 34231 0603  SARASOTA FL 34231 0603  SARASOTA FL 34231 0603  SARASOTA FL 34231 0603  2. Principal Place of Business 2. Amailing Address 2. Date incorporated or Qualifed 11/14/1979  Suite, Apt. #, etc. 2. Suite, Apt. #, etc. 3. Date incorporated or Qualifed 11/14/1979  Applied F  Suite, Apt. #, etc. 3. Date incorporated or Qualifed 11/14/1979  Applied F  Sp-1961149  Not Applied Fee Required Fee
2. Principal Place of Business  2. Mailing Address  3. Date Incorporated or Qualifed 11/14/1979  Suite, Apt. #, etc.  Suite, Apt. #, etc.  Suite, Apt. #, etc.  59-1961149  Not Applied  Foundary  Zip  Country  Zip  Country  Zip  Country  Zip  Country  Zip  Country  Added to Fees  9. Name and Address of Current Registered Agent  MARONE, BOB  570 - 571H AVE. WEST, #107  BRADENTON FL 34207  BY  BRADENTON FL 34207  11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statutes, the aboven-named corporation submits this statement for the purpose of changing its 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, agent, I am familiar with, and accept the obligations of, Section 617,0503, Florida Statutes.  SIGNATURE  Signature, toped or printed name of registered agent and life if applicable.  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN TIME  PLINAME  PETER HORSTMAN  STREET ADDRESS  2155 WOOD ST #B8  CITY-ST-ZPP  SARASOTA FL 34237  Change  Applied F  11/14/1979  4. FEI Number  50-1961149  Not Applied  FSUBLICATION  SUBLICATION  Applied F  11/14/1979  4. FEI Number  50-1961149  Not Applied  FSUBLICATION  Change  Applied F  11/14/1979  4. FEI Number  50-1961149  Not Applied  FSUBLICATION  Change  Applied F  11/14/1979  Applied F  11/14/1979  4. FEI Number  50-1961149  Not Applied  FSUBLICATION  Change  Applied F  12/1504 STREET ADDRESS  13/5 WOOD STREET, Al  13/5 STREET ADDRESS  2155 WOOD STREET, Al  13/5 STREET ADDRESS  2155 WOOD STREET, Al  13/5 STREET ADDRESS  2150 WOOD STREET, Al  13/5 STREET ADDRESS  2150 WOOD STREET, Al  13/5 STREET ADDRESS  2150 WOOD STREET, Al  13/5 STREET ADDRESS  13/5 STREET ADDRESS  2150 WOOD STREET, Al  21 TIME  21 TIME  21 TIME  21 TIME  22 TIME  22 TIME  22 TIME  22 TIME  22 TIME  23 TIME  24 TIME  24 TIME  25 TIME  25 TIME  25 TIME  25 TIME  26 TIME  27 TIM
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Suite, Apt. #, etc.    Suite, Apt. #, etc.
City & State
City & State  Fee Required  Fee Required  Country  Zip  Country  Zip  Country  Added to Fees  S. Name and Address of Current Registered Agent  B1 Name  MARONE, BOB  570 - 57TH AVE. WEST, #107  BRADENTON FL 34207  B2 Street Address (P.O. Box Number is Not Acceptable)  FL B5 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 register 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, 1 am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  SIGNATURE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN  TITLE PD DATE  1.1 TITLE DATE  Change PAT POST  DELETE 2.1 TITLE  VD DELETE 2.1 TITLE  VD Change PAT POST  Country  6. Election Campaign Financing  Trust Fund Contribution  Address of New Registered Agent  10. Name and Address of New Registered Agent  11. Name  12. Street Address (P.O. Box Number is Not Acceptable)  13. Title PD DATE  Change PAT POST  Change PAT POST  Change PAT POST
Zip Country Zip Country Sp. 00 May B Added to Fees Required 25 29 30 Trust Fund Contribution Added to Fees 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 84 City FL 85 Zip Code 86 Zip Code 87 Zip Zip Code 87 Zip Zip Code 87 Zip
24 25 29 30 Trust Fund Contribution Added to Fees  9. Name and Address of Current Registered Agent  MARONE, BOB 570 - 57TH AVE. WEST, #107 BRADENTON FL 34207  82 Street Address (P.O. Box Number is Not Acceptable)  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 register 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, the above-named 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, the above-named 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, the above-named 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, the above-named corporation submits this statement for the purpose of changing its register of the objective of the obj
9. Name and Address of Current Registered Agent  MARONE, BOB 570 - 57TH AVE. WEST, #107 BRADENTON FL 34207  81
MARONE, BOB 570 - 57TH AVE. WEST, #107 BRADENTON FL 34207  83  Street Address (P.O. Box Number is Not Acceptable)  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 register 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  Signature, typed or printed name of registered agent and title if applicable.  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN TITLE  PD  NAME  PETER HORSTMAN  STREET ADDRESS  2155 WOOD ST #88  SARASOTA FL 34237  TITLE  VD  PAT POST  Change  A  City  FL  STREET ADDRESS  APAAS • TA  FL 3 42-37  Change  A  Change  Change  A  Change  Chang
MARONE, BOB 570 - 57TH AVE. WEST, #107 BRADENTON FL 34207  83  City  FL  85  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 register 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, arm familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  Signature, typed or printed name of registered agent and tible if applicable.  DATE  12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN TITLE  PD  NAME  PETER HORSTMAN  STREET ADDRESS  2155 WOOD ST #B8  13 STREET ADDRESS  2155 WOOD ST #B8  13 STREET ADDRESS  14 CITY-ST-ZIP  SARASOTA FL 34237  TITLE  VD  NAME  PAT POST  DELETE  21 TITLE  Change  A  City  FL  85  Zip Code  15 Supported Agent signature required when reinstating)  DATE  Change  A  City  FL  85  Zip Code  15 Supported Agent signature required when reinstating)  DATE  12 NAME  13 STREET ADDRESS  21 S WOOD STREET, A1  13 STREET ADDRESS  21 S WOOD STREET, A1  13 STREET ADDRESS  21 S WOOD STREET, A1  14 CITY-ST-ZIP  NAME  PAT POST  Change  A  City  FL  87  Change  A  City  FL  B
BRADENTON FL 34207  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 register 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 am amount agent and title if applicable.  SIGNATURE  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable.  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1.1 TITLE  PD  NAME  PETER HORSTMAN  STREET ADDRESS  2155 WOOD ST #B8  13 STREET ADDRESS  CITY-ST-ZIP  SARASOTA FL 34237  TITLE  VD  DELETE  1.1 TITLE  DRAUGE GERLOTT  2 JESS 400 P STREET, AI  Change  AL  City  FL  85  Zip Code  85  Zip Code  1.1 TITLE  DRAUGE GERLOTT  2 JESS 400 P STREET, AI  Change  AL  City  FL  85  Zip Code  1.1 TITLE  DRAUGE GERLOTT  2 JESS 400 P STREET, AI  Change  AL  City  FL  85  Zip Code  1.1 TITLE  DRAUGE GERLOTT  2 JESS 400 P STREET, AI  Change  AL  City  FL  85  Zip Code  1.1 TITLE  DRAUGE GERLOTT  2 JESS 400 P STREET, AI  Change  AL  City  FL  87  Change  AL  City  FL  88  City
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NAME SANDY PIPER 32 NAME
STREET ADDRESS 2155 WOOD ST #A-19 3.3 STREET ADDRESS
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NAME JOSEPHINE JANSEN  LEPTELLE 1.1 TITLE 5D  LATTILE 5D
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CITY-ST-ZIP SARASOTA FL 34237  44CITY-ST-ZIP SARASOTA FL 34237
TITLE D DELETE 5.1 TITLE TD DECEMBER D
NAME CATHERINE COLEMAN 52 NAME
STREET ADDRESS 2155 WOOD ST #A-26 53 STREET ADDRESS
CITY-ST-ZIP SARASOTA FL 34237
CITY-ST-ZIP   SARASOTA FL 34237   5.4 CITY-ST-ZIP     TITLE   AS   IN OELETE   6.1 TITLE   AS   Change   IN OELETE   Change   IN OELETE   IN OELETE   IN OELETE   IT OELETE

SARASOTA FL 34231

14. 1 hereby certify that the information supplied with this filiperatoes 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 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:

CITY-ST-ZIP