FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 750008

1. Corporation Name

YORK MANOR CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business
3160-36TH STREET N

Mailing Address

3160-36TH STREET N

FILED Apr 19, 1999 8:00 am § Secretary of State

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		£11 619 18 61881 6 171	

ST. PETERSBURG FL 33713 ST. PETERSBURG FL 33713									
2. Principal Place of Business		2a. Mailing Add	2a. Mailing Address			Date Incorporated or Qualifed 12/03/1979			·]
21]			Suite, Apt. #, etc.			4. FEI Number		App	lied For
22		27	⊢ '''			59-2153910		Not	Applicable :
City & State	•	City & State				5. Certifcate of Status Desired		\$8.75 A	
23 Zip	Country	28 Zip		Country	<u></u>	6. Election Campaign Financing		\$5.00	
24	25	29	30	,		Trust Fund Contribution		Added to	
24		of Current Registered Agent				10. Name and Address of New R	egistered /	Agent	
				81	Name				
CORBIN, C	NADI EQ			82	Street Addr	ress (P.O. Box Number is Not Accepta	ble)		
	I STREET NORTH		82 Street Addre		ess (1.0. box realitiber is rect receptor				
	SBURG FL 33713			83					
STILL	Opona 1 E 307 13			84	City			85 Zip C	ode
					•		FL	. `	
office or n agent. I a	egistered agent, or both, if	ns 617.0502 and 617.1508, Flo the State of Florida. Such cha t the obligations of, Section 617	rida Statutes, th nge was author .0503, Florida S	ne above ized by Statutes	-named corp the corporation	poration submits this statement for the on's board of directors. I hereby accept	purpose of t the appoir	changing its r itment as reg	registered jistered
SIGNATURE		registered agent and title if applicable.	(NOTE: Regis	tered Agen	t signature require	d when reinstating)	DATE		
12.	OFF	ICERS AND DIRECTORS		13.		ADDITIONS/CHANGES TO OF	ICERS AN		
TITLE	PD		DELETE	1.1 TITLE				Change	Addition
NAME	CORBIN, CHARLES			1.2 NAME	ļ]
STREET ADDRESS	3160 36TH ST N			1.3 STREET	ADDRESS				
CITY-ST-ZIP	ST PETE FL	· · · · · · · · · · · · · · · · · · ·		1.4 CrTY-\$]	-ZIP				
TITLE	VPD		DELETE :	2.1 TITLE				Change	Addition
NAME	HOWARD, FAYE		.	2.2 NAME	- 1				
STREET ADDRESS 3160 36TH ST., N.				2.3 STREET ADDRESS					
CITY-ST-ZIP	ST PETE FL			2. 4 CITY-S	T-ZIP				
TITLE	D		DELETE :	3.1 TITLE				☐ Change	☐ Addition
NAME	PASSON, CLIFF			3.2 NAME					
STREET ADDRESS	3160 36TH ST. N.		1	3.3 STREET	ADDRESS				Ì
CITY-ST-ZIP	ST PETE FL			3.4. CITY-S	T-ZIP				
TITLE	D		DELETE	4.1 TITLE				Change	☐ Addition
NAME	HOWARD, RICHARD		1.	4. 2 NAME	Ì				1
STREET ADDRESS	3160 36TH ST N			4.3 STREET	ADDRESS				
CITY-ST-ZIP	ST PETE FL			4.4 CITY-S1	-ZIP			<u></u>	
TTILE	D			5.1 TITLE				☐ Change	Addition
NAME	VERHAVEK, FRANK			5.2 NAME					ļ
STREET ADDRESS	3160 36TH ST N			5.3 STREET	- 1		•		[
CITY-ST-ZIP	ST PETE FL			5.4 CITY-S	-ZIP				
TITLE	STD		DECETE	6.1 TITLE				Change	☐ Addition
NAME	FLORA, LUANNA			6.2 NAME					
STREET ADDRESS	3160 36TH STREET, 1	NORTH	1	6.3 STREET	ADDRESS				1
					- 710				1

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 changes from an attachment with an address, with all other like empowered.

SIGNATURE: