NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 750259

CORTEZ VILLAS CONDOMINIUM 12 ASSOCIATION, INC.

Principal Place of Business 4100 37TH AVENUE. WEST **BRADENTON FL 34205**

2. Principal Place of Business

21

Mailing Address

2a. Mailing Address

26

4100 37TH AVENUE, WEST **BRADENTON FL 34205**

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

02-23-1999 90026 019 ****61.25

3. Date Incorporated or Qualifed

12/17/1979

| Suite, Apt. | ite, Apt. #, etc. Suite, Apt. #, etc. | | | | 4. FEI Number | | Applied For | |
|--|---------------------------------------|------------|-------------|--------------------------------------|--------------------------------------|--------------|--------------------------------|--------------|
| 22 | 27 | | | | 59-1957417 | | No | t Applicable |
| City & State | ity & State City & State | | | | 5. Certifcate of Status Desired | | \$8.75 Additional Fee Required | |
| | | | | intry 6. Election Campaign Financing | | | \$5.00 | May Be |
| 24 | 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 | | | | |
| MEICONED CDECODY C | | | | Ctroat Ada | lean (D.O. Bay Number is hist Assent | abla) | | |
| MEISSNER, GREGORY C 543 TENTH STREET, WEST | | | | Street Aut | dress (P.O. Box Number is Not Accept | aule) | | |
| BRADENTON FL 34205 | | | | | | ***** | | |
| DRADENTON PL 34203 | | | | | | | Jan 1 7: 4 | |
| | | | | City | | FL | 85 Zip (| ode |
| 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, types of printed name of registation again, and the inapplication. | | | | | | | | RS IN 12 |
| 12. | OFFICERS AND | DIRECTORS | 13. | | ADDITIONS/CHANGES TO OF | I ICENS AIT | Change | Addition |
| TITLE | TD | C) DECE IE | 1.2 NAME | | | | | |
| NAME | mooner, meeran o | | | | | | | |
| STREET ADDRESS | THE SOUTH AVE WEST | | 1.3 STREET | | | | | |
| CITY-ST-ZIP | | | 1.4 CITY-ST | -ZIP | | | ☐ Change | Addition |
| TITLE | D | ☐ DELETE | 2.1 TITLE | | | | Change | ☐ Addition |
| NAME | KNAPP, DONALD | 2.2 N | | | | | | |
| STREET ADDRESS | 4106 38TH AVE. W. | | 2.3 STREET | ADDRESS | | 152 | | . |
| CITY-ST-ZIP | BRADENTON FL | | 2.4 CITY-S | T-ZIP | | | | , 1 |
| TITLE | SD | ☐ DELETE | 3.1 TITLE | ì | | | Change | Addition |
| NAME | HOOGSTRA, ELAINE | | 3.2 NAME | | | | | |
| STREET ADDRESS | 4004 38TH AVE W 335 | | 3.3 STREET | ADDRESS | | | | |
| CITY-ST-ZIP | BRADENTON FL | | 3.4. CITY-S | | | | | |
| TITLE | VD | 🖾 DELETE | 4.1 TITLE | VD | | | Change | ★ Addition |
| NAME | JENSEN, LEIF | | 4. 2 NAME | | JESMER, THELMA | | | |
| STREET ADDRESS | 3705 41ST STREET WEST | | 4.3 STREET | ADDRESS | 3706 39th St Wes | t | | |
| CITY-ST-ZIP | BRADENTON FL | | 4.4 CITY-ST | -ZIP | Bradenton, FE1 | | | |
| TITLE | PD | X DELETE | 5.1 TITLE F | D Q | • | | ☐ Change | Addition |
| NAME | BENNETT, JAN | | 5.2 NAME | | ED, HOOGSTRA | | | |
| STREET ADDRESS | 3607 - 41ST ST, W | ■ | | | 4004 38th Ave We | st | | |
| CITY-ST-ZIP | BRADENTON FL | | | -ZIP | Bradenton, FF1 | | | |
| TITLE | D | DELETE | 6.1 TITLE | | | | Change | ☐ Addition |
| NAME | FIELDING, CHARLES | | 6.2 NAME | | | | | |
| STREET ADDRESS | 3708 39TH ST, W | | 6.3 STREET | ADDRESS | | | | |
| CITY-ST-ZIP | BRADENTON FL | | 6.4 CITY-ST | - ZIP | | | | |
| | | | | | 0 - 4 - 440 07/0\/i> Eti-l- Ot-t-t | | نصطة فمطه بشنا | _ = |

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 william D. Mooney