## FILE NOW: FILING FEE IS \$61.25

**NONPROFIT** CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

751745

(1)

89 OCEANFRONT CONDOMINIUM ASSOCIATION, INC.											
Principal Place of Business Mailing Address									I IDANIA 1880) OZIBEL KIBIL MABIL OLOBOL OLIH OLOHE GERİL OLUĞU BIRIL OLUĞU BIRIL OLUĞU BIRIL BIRIL BIRIL BIRIL		
89 SOUTH ATLANTIC AVENUE ORMOND BEACH FL 32176				89 SOUTH ATLANTIC AVENUE ORMOND BEACH FL 32176						3. Date Incorporated or Qualified 03/26/1980	
										4. FEI Number Applied For 59-2129737 Not Applicable	
Principal Place of Business     The Principal Place of Business     The Principal Place of Business					2a. Mailing Address					Certificate of Status Desired     Sa.75 Additional Fee Required	
Suite, Apt. #, etc.					Suite, Apt. #, etc.					6. Election Campaign Financing \$5.00 May Be	
22		·	27						Trust Fund Contribution		
City & State				City & State						7. Is this nonprofit corporation a homeowners association?	
23					28					Yes No	
Zip	Country			-	¬ ' —		Country			8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.  Yes X No	
24 25 9. Name and Address of Curren				29 30 30				<del></del>		Personal Property Tax due June 30. Yes X No  10, Name and Address of New Registered Agent	
						-	81	Nar	ne		
ROSE, JAMES											
20 N HALIFAX AVENUE							82	2 Street Address (P.O. Box Number is Not Acceptable)			
DAYTONA BEACH FL.22118							83				
										lee 1.2. August	
		,					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 registere agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.											
SIGNATURE .							<del> </del>				
Signature, typed or printed name of registered agent and title it applicable. (NOTE: Registered Ag  12. OFFICERS AND DIRECTORS 13.							ent signa	nt signature required when reinstaing)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	SD		ICC NO PAND	DINLO	DELETE	╅	1.1 TITLE			Change Addition	
NAME		N, SHARON				ı	1.2 NAME				
STREET ADDRESS	00 0 471 441710 4157 4000						1.3 STREET ADDRESS				
CITY-S1-ZIP ORMOND BEACH FL						1.4 CITY-ST-ZIP					
TITLE	10							2.1 TITLE		Change Addition	
NAME	O'BRIEN	N, ETHEL					2.2 NAME			· —	
STREET ADORESS	89 S ATLANTIC AVE #506				1	2.3 STREET ADDRESS					
CITY-S1-ZIP	ORMOND BEACH FL					1	2.4 CITY+ST-ZIP		]		
TITLE	PÕ				☐ DELETE	1	3.1 TITLE			Change Addition	
NAME		r, Sandra					3.2 NAME				
STREET ADDRESS 89 S ATLANTIC AVE #301						ŀ	3.3 STREE	T ADDRE	ss		
CITY-ST-ZIP		D BCH, FL	00000				3.4. CITY-	ST-ZIP			
TITLE	VD				☐ DELETE	T	4.1 TITLE		<b>T</b>	TD 🔀 Change 🗌 Addition	
NAME	COSNE					]	4. 2 NAME		1		
STREET ADDRESS		LANTIC AVI				1	4.3 STREE	t addre	ss		
CITY-ST-ZIP	ORMON	id Beach F	L			- 1	4.4 CITY-1	ST-ZIP	- 1		

ORMOND BEACH FL 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 recoiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address.

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

DELETE

DELETE

SIGNATURE:

ZITZKE, VERNE

89 S ATLANTIC AVE #906

ORMOND BCH, FL 00000

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

RYDEN, ERIC

89 S ATLANTIC AVE. #801

Sandra Glover 4/14/98 673-8450

Change Addition

Change X Addition

**FILED** 

Apr 22 1998 8:00am

Secretary of State