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NONPROFIT
 CORPORATION
 ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # 755435

1. Corporation Name
PIRATE'S COVE CLUB CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business C/O RESOURCE PROPERTY MGMT 118 PINELLAS BAYWAY TERRA VERDE FL 33715 US	Mailing Address C/O RESOURCE PROPERTY MGMT 118 PINELLAS BAYWAY TERRA VERDE FL 33715 US
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2. Principal Place of Business 21 6025 SUN BLVD Suite, Apt. #, etc. 22 SUITE 202 City & State 23 ST PETERSBURG, FL Zip Country 24 33715 25 USA.	2a. Mailing Address 26 6025 SUN BLVD. Suite, Apt. #, etc. 27 SUITE 202 City & State 28 ST. PETERSBURG, FL Zip Country 29 33715 30 USA.	3. Date Incorporated or Qualified 12/09/1980	4. FEI Number 59-2140319 Applied For Not Applicable	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
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9. Name and Address of Current Registered Agent PIRATES COVE CONDOMINIUM % RESOURCE PROPERTY MGMT 118 PINELLAS BAYWAY TERRA VERDE FL 33715	10. Name and Address of New Registered Agent 81 Name ALBERTO FREDA 82 Street Address (P.O. Box Number is Not Acceptable) 6025 SUN BLVD 83 SUITE 202 84 City ST. PETERSBURG 85 FL Zip Code 33715
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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: Alberto Freda DATE: 4/1/99

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VP <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CUSICK, MARLENE	1.2 NAME	
STREET ADDRESS	1375 PINELLAS BAYWAY, #38	1.3 STREET ADDRESS	
CITY-ST-ZIP	TERRA VERDE FL 33715	1.4 CITY-ST-ZIP	
TITLE	TD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JIM ECKLES	2.2 NAME	
STREET ADDRESS	1355 PINELLAS BAYWAY #5	2.3 STREET ADDRESS	
CITY-ST-ZIP	TERRA VERDE FL 33715	2.4 CITY-ST-ZIP	
TITLE	PD <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JANET OLSON	3.2 NAME	
STREET ADDRESS	1375 PINELLAS BAYWAY	3.3 STREET ADDRESS	
CITY-ST-ZIP	TERRA VERDE FL 33715	3.4 CITY-ST-ZIP	
TITLE	SD <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FRED LINK	4.2 NAME	
STREET ADDRESS	1355 PINELLAS BAYWAY #12	4.3 STREET ADDRESS	
CITY-ST-ZIP	TERRA VERDE FL 33715	4.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HUSICK, CHARLES	5.2 NAME	
STREET ADDRESS	1375 PINELLAS BAYWAY #29	5.3 STREET ADDRESS	
CITY-ST-ZIP	TERRA VERDE FL 33715	5.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	NICK CRAPIS	6.2 NAME	
STREET ADDRESS	1355 PINELLAS BAYWAY #1	6.3 STREET ADDRESS	
CITY-ST-ZIP	TERRA VERDE FL 33715	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 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: Nick Crapis SIGNATURE REQUIRED DATE: 4/15/99 Daytime Phone #

CR2E037 (11/98)