## 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 #

(8)

AZALEA WOODS CONDOMINIUM ASSOCIATION, INC.

**FILED** Apr 06 1998 8:00am Secretary of State

Principal Plac	e of Business	Mailing Address	Mailing Address			-		III EILII IDBI	
2697-B SUNSET POINT ROAD		2697-B SUNSET POINT ROAD				3. Date Incorporated or Qualified			
CLEARWATER	PL SHOTE"	CLEARWATER FL 34619	CLEARWATER FL 34619			01/22/1981			
						4. FEI Number 59-2169265		olied For	
2. Principal Place of Business 2a. Mailing Address								Applicable	
21		26	26			1 0. Certificate di Status Desired	Fee Re	dditional quired	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.				5.00 N	lay Be	
22 City & State		27 City & City	City & State			· <del>·</del>	dded to		
23	28	ale			7. Is this nonprofit corporation a homeowners association?  Yes No				
Zip				Country		8. This corporation owes or has paid the current year intangible			
24 3375	33759 25 29 33759 30			Personal Property Tax due June 30. Yes No					
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent			
				81	Name				
NASSER, WILLIAM J.			Ì	82	Street Addre	t Address (P.O. Box Number Is Not Acceptable)			
2897-B SUNSET POINT ROAD CLEARWATER FL 34619 33759			ŀ	83					
CLLA	TATELLI C OTOTO						1		
l <u>.</u>			- 1	84	City	FL  85	Zip C	code	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above						pration submits this statement for the purpose of char	iging 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									
				Registered Agent signature requests 13.			CTOD	2 11 40	
TITLE	OFFICERS AND DIRECTORS  DELETE			1.1 TITLE		ADDITIONS/CHANGES TO OFFICERS AND DIRE	Change	Addition	
NAME	DEMEIS, JOSEPH		1.2 NAME			۵,	nango	Account	
STREET ADORESS	2460 NORTHSIDE DR 1501		1.3 STREET ADDRESS		INDECC				
CITY-ST-ZIP	CLEARWATER FL		1.4 CITY-ST-ZIP						
TITLE	P	DELETE	2.1 TIT		- 217		hange	Addition	
NAME	DEMEO, PAUL M	EMEO, PAUL M 22		2.2 NAME		<del>-</del>	•		
STREET ADDRESS	2460 NORTHSIDE DR 603		2.3 STREET ADDRESS		LDDRESS				
CITY-ST-ZIP	CLEARWATER FL	CLEARWATER FL 2.4		2. 4 CITY-ST-ZIP					
TITLE	D	☐ DELETE	3.1 TIT	LE			hange	Addition	
NAME	WHITE, GERALDINE		3.2 NAME						
STREET ADDRESS	2460 NORTHSIDE DR			3.3 STREET ADDRESS					
CITY-ST-ZIP	CLEARWATER FL	N pourte	3.4. CITY-		- ZIP			T 4 1 8 8	
TITLE	TD OOLDEN HELEN	DELETE	4.1 TIT		T	<del>_</del> `	hange	☐ Addition	
NAME	GOLDEN, HELEN 2460 NORTHSIDE DR #1303		4. 2 NAME		Li	nning, Colleen			
STREET ADDRESS	CLEARWATER FL		4.3 STREET AL		24	60 Northside Drive #903			
CITY-ST-ZIP TITLE	SD	DELETE	5.1 TIT		-21P C1	earwater, FL 33761	hange	Addition	
NAME	MCOWEN, JUDY A		5.1 TITLE 5.2 NAME				nango		
STREET ADDRESS					DORESS				
CITY-ST-ZIP	CLEARWATER FL		5.4 CITY-						
TITLE		☐ DELETE	6.1 TITLE				hange	Addition	
NAME	62		6.2 NA	62 NAME				}	
STREET ADDRESS	RESS 63		6.3 ST	6.3 STREET ADDRESS					
CITY-ST-ZIP	partify that the information cumplied will		6.4 CIT						
						Parties 440 07(2)(i) Florida Castudas I funthes applicat			

remove compliance in 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 Informatio 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.