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NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 758764

1. Corporation Name

THE SANDCASTLE II CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

720 S. COLLIER BLVD MARCO ISLAND FL 34145 Mailing Address

720 S. COLLIER BLVD MARCO ISLAND FL 34145

FILED Apr 21, 1999 8:00 am Secretary of State

04-21-1999 90116 032 ****70.00

3/645/ - 90116 - 32



1	Place of Business S COLLIER BLVD	2a. Mailing Address 720 S COLLIE	'R RI	.VD	3. Date Incorporated or Qualifed 06/15/1981		
ZT			JR DE		4. FEI Number	- I Ana	olied For
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			59-2126907	<u> </u>	Applicable
22		27			39 2 120901	\$8:75 A	
City & State CIT & State MARCO ISLAND, FL MARCO ISLAND			, FL		5. Certificate of Status Desired	Fee Rec	
Zip	Country	Zip	Country		6. Election Campaign Financing	\$5.00	May Be
24 34 1	45 25 USA	29 34 14 5	USA	L	Trust Fund Contribution	Added to	Fees
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name							
MATHURIN, TODD: Special Control				82 Street Address (P.O. Box Number is Not Acceptable)			
COLLIER BUSINESS CONSULTANTS INC.							
5017 TAMIAMI TRAIL EAST					_		
PANAMA CITY BEACH FL 33941				City		. 85 Zip C	ode
1 CHACHAIC	Version for the Actions		. 84	City	F	L "	~~~
44 D							
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.							
_		ona oi, occion o ir.cood, riona	a Juinte				
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Re	egistered Age	nt signature re-	quired when reinstating) DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTOR	RS IN 12
TITLE	D	☐ DELETE	1.1 TITLE	T		Change	Addition
NAME	MEADOWS, RICHARD		1.2 NAME				
STREET ADDRESS			1.3 STREE	T ADDRESS			
CITY-ST-ZIP	MARCO ISLAND FL 34145		1.4 CITY- S	iT-ZIP			
TITLE	D .	DELETE	2.1 TITLE		DIRECTOR	Change	Addition
NAME	BODRIE, GERALD E		2.2 NAME		DR HAROLD MILKEY		
STREET ADDRESS			2.3 STREE	TADORESS	720 S COLLIER BLVD		
CITY-ST-ZIP	MARCO ISLAND FL 34145		2. 4 CITY-	ST-ZIP	MARCO ISLAND FL 34145	-	-
TITLE	D	☐ DELETE	3.1 TITLE			Change	Addition
NAME	LOMONTE, RICHARD		3.2 NAME	-			
STREET ADDRESS	1		3.3 STREE	TADDRESS			
CITY-ST-ZIP	MARCO ISLAND FL 34145		3.4. CITY-	ST-ZIP			
TITLE	T	☐ DELETE	4.1 TITLE			Change	Addition
NAME	MERLING, LINDA		4. 2 NAME				
STREET ADDRESS			4.3 STREE	TADDRESS			
CITY-\$T-ZIP	MARCO ISLAND FL 34145		4.4 CITY-5				
TITLE	p	☐ DELETE	5.1 TITLE	-		Change	Addition
NAME	FRICK, JAMES W		5.2 NAME				
STREET ADDRESS			5.3 STREE	TADORESS			
CITY-ST-ZIP	MARCO ISLAND FL 34145		5.4 CITY-5	ST-ZIP			
		□ DELETE ,	6.1 TITLE			Change	Addition
	V. COMPACTOR		6.2 NAME			_ •	
OWNER A A A A A A A A A A A A A A A A A A A	ELLIS VIVIEN			T ADDRESS			
	720 S. COLLIER BLVD		6.4 CITY-5				
CITY OF TIDE 18	A MARTEN ISLAND EL SA145		■ 0.4 UH Y • 3	21.77			

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 abachment with an address, with all other like empowered.

SIGNATURE:

REQUES!

4/14/99

941-642-0779