

**FILE NOW: FILING FEE IS \$61.25**

**FILED**

**Feb 24 1998 8:00am  
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 759311 (4)**  
1. Corporation Name  
**LITTLE GULL CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business <b>5330 GULF OF MEXICO DR. LONGBOAT KEY FL 34228</b>	Mailing Address <b>5330 GULF OF MEXICO DR. LONGBOAT KEY FL 34228</b>
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3. Date Incorporated or Qualified <b>07/27/1981</b>	
4. FEI Number <b>59-2109923</b>	Applied For <input type="checkbox"/> Yes <input checked="" type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent  
**CUNNINGHAM PROPERTY MANAGEMENT CORP.  
1030 SEASIDE DRIVE  
SARASOTA FL 34242**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	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 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	V <b>STAECKER, DEL</b> 1653 BAYWINDS LANE SARASOTA FL	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>STAECKER, DEL</b>	1.2 NAME	
STREET ADDRESS	<b>1653 BAYWINDS LANE</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP	<b>SARASOTA FL</b>	1.4 CITY-ST-ZIP	
TITLE	D <b>SHEVLOFF, ELIZABETH</b> 4411 COUNTRY CLUB BLVD, UNIT A-1 CAPE CORAL FL	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>SHEVLOFF, ELIZABETH</b>	2.2 NAME	
STREET ADDRESS	<b>4411 COUNTRY CLUB BLVD, UNIT A-1</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP	<b>CAPE CORAL FL</b>	2.4 CITY-ST-ZIP	
TITLE	ST <b>LOHNER, JIM</b> 2002 TOCObAYA LANE NOKOMIS FL	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>LOHNER, JIM</b>	3.2 NAME	
STREET ADDRESS	<b>2002 TOCObAYA LANE</b>	3.3 STREET ADDRESS	
CITY-ST-ZIP	<b>NOKOMIS FL</b>	3.4 CITY-ST-ZIP	
TITLE	P <b>TOLLE, DIRK</b> 2914 PONDEROSA TRAIL WIMAUMA FL	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>TOLLE, DIRK</b>	4.2 NAME	
STREET ADDRESS	<b>2914 PONDEROSA TRAIL</b>	4.3 STREET ADDRESS	
CITY-ST-ZIP	<b>WIMAUMA FL</b>	4.4 CITY-ST-ZIP	
TITLE	B.V. <b>COWELL, FRANK</b> 3827 WOLVERINE ST SARASOTA FL	5.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>COWELL, FRANK</b>	5.2 NAME	<b>COWELL, FRANK</b>
STREET ADDRESS	<b>3827 WOLVERINE ST</b>	5.3 STREET ADDRESS	<b>3827 WOLVERINE ST</b>
CITY-ST-ZIP	<b>SARASOTA FL</b>	5.4 CITY-ST-ZIP	<b>SARASOTA, FL</b>
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME	<b>D NICOLLE, EDGAR</b>
STREET ADDRESS		6.3 STREET ADDRESS	<b>3618 S. HIMES AVE</b>
CITY-ST-ZIP		6.4 CITY-ST-ZIP	<b>TAMPA, FL 33629</b>

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 in an attachment with an address.

SIGNATURE: *Dirk Tolle* **DIRK V. TOLLE** 2/6/98 941 383-8818

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