FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 764466

1. Corporation Name

1000 BEACH ROAD CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

2a. Mailing Address

26

1 TURTLE BEACH ROAD INDIAN RIVER SHORES FL 32963

2. Principal Place of Business

21

1 TURTLE BEACH ROAD INDIAN RIVER SHORES FL 32963

FILED Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90228 007 ****61.25





3. Date Incorporated or Qualifed

08/09/1982

City & State Country City & State City & State City & State Country City & State Country City & State Country City & State Country City & State	Suite, Apt.	Suite, Apt. #, etc. Suite, Apt. #, etc.				4. FEI Number		App	lied For	
Style Status	22					59-2158377		Not Applicable		
Zip Country Zip Country Zip Country G. Election Campaign Financing S\$.00 May be Added to Fees	City & State	City & State			5. Certificate of Status Desired					
4		Country		Country		6 Election Campaign Financia	10	\$5.00	Any Bo	
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 11. Name 12. Street Address (P.O. Box Number is Not Acceptable) 13. Name 14. City 15. Descriptions of Sections 617.0502 and 617.1508. Floridal Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Forida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Forida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Forida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Forida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Forida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Forida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I hereby accept the polygonia for registered agent. I hereby accept the polygonia for registered agent. I hereby accept the polygon for registered agent. I hereby accept the appointment as registered agent. I hereby accept the polygon for registered agent. I hereby accept the appointment as registered agent. I hereby accept the origination agent. I hereby accept the appointment as registered agent. I hereby accept t	¬ `	<u> </u>	<u> </u>	¬						
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### City FL 85 Zip Code	1 TURTLE BEACH ROAD				<u> </u>					
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CITY-ST-ZIP 14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information	CITY-ST-ZIP	PORTION THAT THE INFORMATION SUPPLIED WITH	this filing does not qualify for th			ection 119.07(3)(i). Florida Statute	s. I further ce	tify that the in	formation	

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 of 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:

SIXMATURE RMICHAEIRE Rose

April 16, 1999

(561)231-1666

Daytime Phone #

CR2E037 (11/98)