FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DIVI

DOCUMENT #
1. Corporation Name

770536

(1)

DIDEBS	WAITE	CONDO	MINIIM	ASSOCIATION.	INC:.

Principal Place of Business Mailing Address					
2055 WOOD STSTE.202 2055 WOOD STSTE.202					
SARASOTA FI		SARASOTA FL 34237-			
				3. Date Incorporated or Qualified 09/30/1983	3a. Date of Last Report 04/05/1995
2. Principal Pla	ace of Business	2a. Mailing Address		4. FEI Number	Applied For
2. Fillicipal Fla 21	ICE OF BUSINESS	26		59-2344285	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		E O III I I I DI I DI II I	\$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	55.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip Country		Zip	Country	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No	
25 25 2 9. Name and Address of Current Re		nt Registered Agent	30	10. Name and Address of New Registered Agent	
	9. Maille alla Address of Curre	iit negisteled Agent	81 Name	10. 1101110 4110 11010	
	m				
	TY & ACCOUNTING MGMT.INC	i.	82 Street Ac	dress (P.O. Box Number is Not Acceptable	6)
	OOD ST.,STE.202		83		
SAHASU	TA FL 33577				
			84 City		FL 85 Zip Code
11 Pursuant to	a the provisions of Sections 617 050	2 and 617.1508. Florida Statu	ites, the above-named corp	poration submits this statement for the purp	nose of changing its registered office
or registers	ed agent, or both, in the State of Flor	rida. Such change was aufhör	ized by the corporation's bo	oard of directors. I hereby accept the appo	intment as registered agent. I am
	th, and accept the obligations of, Sec	CION 617.0503, FIORICA STATULE	35.		
SIGNATURE _	Signature, typed or printer name of registered ager	nt and title if applicable. (N	IOTE: Registered Agent signature reck	uired when reinstating)	DATE
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE		Change Addition
NAME	SANDSTROM, EDITH		1.2 NAME		
STREET ADDRESS	5638 PIPERS WAITE		1.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		1.4 CITY - ST - ZIP		
TITLE	DS MARGUELL	TE DELETE	2.1 ₹ITL€		☐ Change ☐ Addition
NAME	romzick, ma rgaret		2.2 NAME		
STREET ADDRESS	5649 PIPERS WAITE		2.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL		2.4 CITY-ST-ZIP		Change D Addition
TITLE	PD	□DELĒTĒ	3.1 TITLE		Change 🔲 Addition
NAME	PALAZZO, DOMINIC		3.2 NAME		
STREET ADDRESS	5682 PIPERS WAITE		3.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL	□DELETE	3.4. CITY-ST-ZIP		Change Addition
TITLE	D CAROOM FRANK	["]nerele	4.1 TITLE		□ Avierièe □ vinoquei
NAME	CARSON, EDWIN		4. 2 NAME		
STREET ADDRESS	5685 PIPERS WAITE		4.3 STREET ADDRESS		
CITY-ST-ZIP	SARASOTA FL	DELETE	4.4 CITY - ST - ZIP 5.1 TITLE		☐ Change ☐ Addition
TITLE	DV DECANTO IOUN		5.2 NAME		
NAME CTREET ADDRESS	DESANTO, JOHN 5691 PIPERS WAITE		5.3 STREET ADDRESS		
STREET ADDRESS	SARASOTA FL		5.4 CITY-ST-ZIP		
CITY - ST - ZIP TITLE	TD	DELETE	61 TITLE		Change Addition
NAME	WILLOW, WILLIAM WILL	_	62 NAME		
STREET ADDRESS	5683 PIPERS WAITE		6.3 STREET ADDRESS		
CITY_ST_7IP	SARASOTA FI		6.4 CITY-S1-ZIP		
de Lala basab		d with this filing is voluntarily fu	roiched and does not quali	fy for the exemption stated in Section 119	07(3)(k), Florida Statutes. I further
certify tha	It the information indicated on this an	nual report or supplemental ar poration or the receiver or trus	nnual report is true and acc itee empowered to execute	curate and that my signature shall have the this report as required by Chapter 617, Fl	Same legal energias il mage ungo
appears in	n Block 12 or Block 13 if changed, o	on an attachment with an ad	Idress.		

SIGNATURE: Wille Willow WILL WILLOW 4/8/96 (4

(12/05)