

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 PM 8:47

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 790996 (3)
1. Corporation Name
SECOND OCEAN CLUB HOUSING ASSOCIATION, INC.

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 02/03/1970	3a. Date of Last Report 04/29/1994
4. FEI Number 59-1318433	Applied For ☐ Not Applicable
5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐	\$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☒ Yes ☐ No	

Principal Place of Business 4410 NORTH A1A VERO BEACH FL 32963	Mailing Address 4410 NORTH A1A VERO BEACH FL 32963
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country

9. Name and Address of Current Registered Agent

STEDRONSKY, BARBARA, J
623 SELKIRK DR
WINTER PARK FL 32782

10. Name and Address of New Registered Agent

81 Name Lorraine H. Forte
82 Street Address (P.O. Box Number is Not Acceptable)
% Advantage Property Mgmt.
83 1224 NE Business Park Place
84 City Jensen Beach FL 85 Zip Code 34957

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Lorraine H. Forte
Signature (typed or printed name of registered agent and title if applicable)

(NOTE: Registered Agent signature required when resigning)

4/25/95
DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	1.1 TITLE	☐ Change ☐ Addition
NAME	MEYER, JOETTA	1.2 NAME	
STREET ADDRESS	1000 WINDERLEY PLACE #132	1.3 STREET ADDRESS	
CITY-ST-ZIP	MAITLAND FL 32751	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	☐ Change ☐ Addition
NAME	FIONDELLA, EDWARD	2.2 NAME	
STREET ADDRESS	31 GLENDALE DRIVE	2.3 STREET ADDRESS	
CITY-ST-ZIP	BRISTOL CT	2.4 CITY-ST-ZIP	
TITLE	DT	3.1 TITLE	☐ Change ☐ Addition
NAME	MORRIS, ROBERT	3.2 NAME	
STREET ADDRESS	4897 LAKE FJORD PASS	3.3 STREET ADDRESS	
CITY-ST-ZIP	MARIETTA GA 30087	3.4 CITY-ST-ZIP	
TITLE	PD	4.1 TITLE	☐ Change ☐ Addition
NAME	MORSE, STEWART	4.2 NAME	
STREET ADDRESS	906 RIDLEY CREEK DR.	4.3 STREET ADDRESS	
CITY-ST-ZIP	MEDIA PA 19063	4.4 CITY-ST-ZIP	
TITLE	DS	5.1 TITLE	☐ Change ☐ Addition
NAME	STEDRONSKY, BARBARA	5.2 NAME	
STREET ADDRESS	623 SELKIRK DR.	5.3 STREET ADDRESS	
CITY-ST-ZIP	WINTER PARK FL 32782	5.4 CITY-ST-ZIP	
TITLE	D	6.1 TITLE	☐ Change ☐ Addition
NAME	STEGGLES, JOHN	6.2 NAME	
STREET ADDRESS	690 INDIAN HARBOR DR	6.3 STREET ADDRESS	
CITY-ST-ZIP	VERO BEACH FL 32908	6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 attachment with an address.

SIGNATURE:

Barbara J. Stedronsky
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
BARBARA J. STEDRONSKY

4/25/95
Date

407-644-5085
Daytime Phone #

13.

790996

D

SAWYER JR., HARRY
P.O. BOX 32092
LAKE LAND, FL 33802

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ROTH, JEROME
P.O. BOX 424
RAYMOND, ME 04071-0424