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 # N00928

1301 BEVILLE ROAD PROFESSIONAL PLAZA CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business						
1301 BEVILLE ROAD						
SUITE 21						
DAYTONA BEACH FL 32119						

2. Principal Place of Business

Mailing Address

1301 BEVILLE ROAD SUITE 21

2a. Mailing Address

DAYTONA BEACH FL 32119

FILED Mar 14, 1999 8:00 am § Secretary of State

03-14-1999 90035 009 ****61.25



3. Date Incorporated or Qualifed

21						26						(01/16/1984						
	e, Apt. #	, etc.				1	Suite, Apt.	#, etc.					El Number			Applie	ed For		
22 1	301	Beville Rd.				27	27						59-2909249			Not A	pplicable		
	& State						City & State					5. Certificate of Status Desired				5 Add	litional		
23 D	avto	tona Beach, FL					В				- 1	- Certificate of Status Desired					Fee Required		
Zip	<u> ,</u>			ountry			Zip	-	Count	y .		6. E	Election Campaign Financing	П	\$5.0)0 ма	ay Be		
24 3	2119	9 [25	Vol	usia	29			30	ا			Trust Fund Contribution	Ш	Add	ed to I	ees		
						Regis	tered Agen	t			10. Name and Address of New Registered Agent								
											Name								
DAVTED AADON											Annette Tutera, CAM								
BAXTER, AARON										Street Address (P.O. Box Number is Not Acceptable) All Florida Realty Services, Inc.									
1301 BEVILLE ROAD #1										83									
DAYTONA BEACH FL 32119										1301 Beville Rd. #21									
										4 City	uton		Beach	FL	85 Z	ip Coo	19		
44 D											cornora	tion	submits this statement for the	numose of o	hanging	its re	gistered		
offi	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.																		
ag	jent. I am	î familiar wî	th, an	d accept	the obligation	ons of	Section 61	7.0503, Flor	ida Statute	s.			3-4-9				1		
SIGNA	TURE /	Inn	LL	te	MA	W	w							DATE					
12.		Ignature, typed	or printe		regisfered agent			(NOTE:	Registered Ag	ent signature	required with		DDITIONS/CHANGES TO OF		DIREC	TORS	S IN 12		
				OFF	ICERS AND	DIKE		DELETE	1.1 TITLE		DP				Chan		Addition		
TITLE		PD					A.	DECETE	1.2 NAM		(_	Shenbanjo		7	•	_		
NAME		WINDLE, I									1								
STREET A	1	1301 BEV							l l	ET ADDRESS		•	Box 441	2244	_		Ì		
CITY-ST-		<u>Daytona</u>	BE/	<u>ICH FL</u>	3211				1.4 CITY				ona Beach, FL	3211	X Chan		Addition		
TITLE		SPD					لبا	DELETE	2.1 TITLE		DVP				K Chan	yo	ا برمورون		
NAME	,	SHENBAN	IJO,	akin					2.2 NAM	•			Lynn Hasting				į		
STREET A	ADDRESS)	1301 BEV	ILLE	RD SUI	TE 5				2.3 STRE	ET ADDRESS	1		Beville Rd.			-	-		
CITY-ST-	ZIP	DAYTONA	BEA	CH_FL	32119				2.4 CITY		Day	tc	ona Beach, FL	3211	9				
TITLE	[]	STD						DELETE	3.1 TITLE		DTS	3			Chan	ge	Addition		
NAME		HASTINGS	S, MA	ARY LYI	VN.				3.2 NAMI	≣	Aar	or	n Baxter				1		
STREET A	ADDRESS	1301 BEV	ILLE	RD SUI	TE 20				3.3 STRE	ET ADDRESS	130	1	Beville Rd.	#1			ļ		
CITY-ST-		DAYTONA							3.4. CffY	ST-ZIP			ona Beach, FL		9				
TITLE								DELETE	4.1 TITLE	:	-		•		Chan	ge	Addition		
NAME	-								4, 2 NAM	E									
STREET A	ADDRESS								4.3 STRE	ET ADDRESS							j		
CITY-ST-	.zn								4.4 CITY	ST-ZIP									
TITLE								DELETE	5.1 TITLE		}				Chan	ge	☐ Addition		
NAME									5.2 NAM	Ē									
STREET A	ADDRESS								5.3 STRE	ET ADDRESS			•				}		
CITY-ST-									5.4 CITY	ST-ZIP									
TITLE								DELETE	6.1 TITLE						Chan	ge	☐ Addition		
NAME									6.2 NAM	ŧ	1			1					
STREET	*DDBESS								6.3 STRE	ET ADDRESS	1		"				}		
SIKEELA	ייייטעבאאן																- 1		

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 suppliemental 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, with all other like empowered.

SIGNATURE: