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Feb 06 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N03265** (8)

1. Corporation Name

**THE CRESCENT BEACH CLUB AT SAND KEY CONDOMINIUM
ASSOCIATION, INC.**

Principal Place of Business

Mailing Address

**1340 GULF BOULEVARD
CLEARWATER FL 34630**

**1340 GULF BOULEVARD
CLEARWATER FL 34630**

3. Date Incorporated or Qualified

05/24/1984

4. FEI Number

59-2621913

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**ALFANO, DOLORES
1340 GULF BLVD.
7B
CLEARWATER FL 34630**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **PD** ☐ DELETE

NAME **ALFANO, DOLORES**
STREET ADDRESS **1340 GULF BLVD #7B**
CITY-ST-ZIP **CLEARWATER FL**

TITLE **VPD** ☒ DELETE

NAME **FRITSCH, NICHOLAS**
STREET ADDRESS **1310 GULF BLVD., #8B**
CITY-ST-ZIP **CLEARWATER FL**

TITLE **SD** ☒ DELETE

NAME **MADDONNI, LOUIS**
STREET ADDRESS **1310 GULF BLVD., #17G**
CITY-ST-ZIP **CLEARWATER FL**

TITLE **TD** ☒ DELETE

NAME **KOZIARA, EUGENE**
STREET ADDRESS **1340 GULF BLVD., 17G**
CITY-ST-ZIP **CLEARWATER FL**

TITLE **VPD** ☒ DELETE

NAME **HARRIS, DR. NORMAN**
STREET ADDRESS **1310 GULF BLVD., #19A**
CITY-ST-ZIP **CLEARWATER FL**

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☒ Addition

2.2 NAME **VPD**

2.3 STREET ADDRESS **LOUIS TALARICO**

2.4 CITY-ST-ZIP **1310 GULF BLVD. #5D**

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME **SD**

3.3 STREET ADDRESS **JAMES HILLESTAD**

3.4 CITY-ST-ZIP **1310 GULF BLVD. #4G**

4.1 TITLE ☐ Change ☒ Addition

4.2 NAME **TD**

4.3 STREET ADDRESS **ARTHUR CANTOR**

4.4 CITY-ST-ZIP **1340 GULF BLVD., #17B**

5.1 TITLE ☐ Change ☒ Addition

5.2 NAME **VPD**

5.3 STREET ADDRESS **RICHARD AMARAL**

5.4 CITY-ST-ZIP **1340 GULF BLVD., #7G**

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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 on an attachment with an address.

SIGNATURE:

[Signature]

1/14/98 (813) 596-9840

CR2E037 (10/97)