

FILE NOW: FILING FEE IS \$61.25

FILED
Apr 14 1998 8:00am
Secretary of State



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

NONPROFIT CORPORATION
ANNUAL REPORT
1998

DOCUMENT # **N04216** (0)
1. Corporation Name
FOUR WINDS MARINA CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business Mailing Address
**16501 STRINGFELLOW RD.
BOKEELIA FL 33922** **7790 BARRANCAS
BOKEELIA FL 33922
US**

3. Date Incorporated or Qualified
07/17/1984
4. FEI Number **59-2635791** 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. Is this nonprofit corporation a homeowners association? Yes No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Zip 29 Country 30 Country

9. Name and Address of Current Registered Agent
**DEVANE, HOWARD
8080 STATE ROAD 31
PUNTA GORDA FL 33982**

10. Name and Address of New Registered Agent
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP
D TAYLOR, HOWARD 16501 STRING FELLOW RD. #202 BOKEELIA FL
D VOLK, WALLY 284 MILL ROAD, #D9 ONTARIO CA
D LETTON, A. HAMBLIN 16501 STRING FELLOW RD. #204 BOKEELIA FL
VPST DEVANE, HOWARD 8223 W JAMESTOWN CIRCLE N FT MYERS FL
D HOFFMAN, BOLAND RT 28 BOX 22 OCEANVIEW DE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP
3.1 TITLE Change Addition 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP
4.1 TITLE Change Addition 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP
PTD CRAWFORD, PETER 1701 GREEN CREST DRIVE VICTORIA, MN 55386
5.1 TITLE Change Addition 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP
VPSD HERELEY, DANIEL 610 OLD ORCHARD ROAD HARVARD, IL 60033
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 on an attachment with an address.

SIGNATURE: *Peter B. Crawford* PETER B. CRAWFORD 3/12/98 (941) 283-0894 (612) 443-2046

CR2E037 (1097)