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**NONPROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N04256

1. Corporation Name

BLUE CRAB KEY CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

C/O MARQUIS MANAGEMENT INC.
9400 GLADIOLUS DR #100
FT. MYERS FL. 33908
US

Mailing Address

C/O MARQUIS MANAGEMENT INC.
9400 GLADIOLUS DR #100
FT. MYERS FL. 33908
US



2. Principal Place of Business

21 **C/O HENKE PROPERTY MGT INC**

Suite, Apt. #, etc.

22 **6213-E PRESIDENTIAL CT**

City & State

23 **FORT MYERS FL**

Zip

24 **33919**

Country

25 **USA**

2a. Mailing Address

26 **C/O HENKE PROPERTY MGT INC**

Suite, Apt. #, etc.

27 **6213-E PRESIDENTIAL CT**

City & State

28 **FORT MYERS FL**

Zip

29 **33919**

Country

30 **USA**

3. Date Incorporated or Qualified

07/18/1984

4. FEI Number

59-2516411 59-2682343

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

9. Name and Address of Current Registered Agent

**STILPHEN, PETER
MARQUIS MANAGEMENT INC.
9400 GLADIOLUS DR #100
FT. MYERS FL 33908**

10. Name and Address of New Registered Agent

81 Name

CAROL J. HENKE

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

HENKE PROPERTY MANAGEMENT INC

83 City

FORT MYERS

FL

85 Zip Code

33919

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

Carol J Henke

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

(NOTE: Registered Agent signature required when reinstating)

4-12-99

DATE

12. OFFICERS AND DIRECTORS

TITLE **D** ☐ DELETE

NAME **DAKOS, NICHOLAS**

STREET ADDRESS **816 SW 48 TERR #2016**

CITY-ST-ZIP **BOKEELIA FL**

TITLE **D** ☒ DELETE

NAME **SCHULTE, DON**

STREET ADDRESS **5943 EASTERLING LANE**

CITY-ST-ZIP **BOKEELIA FL**

TITLE **DVP** ☐ DELETE

NAME **KELLER, BILL**

STREET ADDRESS **5411 BLUE CRAB CIR., P2**

CITY-ST-ZIP **BOKEELIA FL**

TITLE **DT** ☐ DELETE

NAME **GOLDSWORTHY, EARL**

STREET ADDRESS **5461 BLUE CRAB CIRCLE, S-3**

CITY-ST-ZIP **BOKEELIA FL 33922**

TITLE **PD** ☐ DELETE

NAME **STIDWELL, JAMES**

STREET ADDRESS **5301 BLUE CRAB CIR**

CITY-ST-ZIP **BOKEELIA FL**

TITLE **SDT** ☒ DELETE

NAME **FLEMING MICHAEL**

STREET ADDRESS **12734-32 KENWOOD LN**

CITY-ST-ZIP **FT MYERS FL**

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

5280 Blue Crab Circle

Bokeelia FL 33922

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

S/D

SCHULTE, EDITH

5401 Blue Crab Circle #01

BOKEELIA FL 33922

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

33922

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

5301 BLUE CRAB CIR #14

33922

6.1 TITLE

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, with all other like empowered.

SIGNATURE:

James Stidwell
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/99
Date

941-481-7150
Daytime Phone #

CR2E037 (1/98)