## **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 # N09887**

PORT ROYAL CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business 1700 N ATLANTIC AVE COCOA BEACH FL 32931-5201

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

22

Mailing Address

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

27

1700 N ATLANTIC AVE COCOA BEACH FL 32931-5201

## FILED May 05, 1999 8:00 am § Secretary of State

05-05-1999 90025 043 \*\*\*\*61.25

4 487030<sup>7</sup> - 90025 - 43

3. Date incorporated or Qualifed 06/20/1985

4. FEI Number

59-2544788



28   29   30   30   5. Election Campaign Financing   \$5.00 May Be Added to Fees   \$9. Name and Address of Current Registered Agent   10. Name and Address of New Registered Agent   10. Name   10	City & State	<del>0</del>	City & State			1	5. Certificate	of Status Desired				ditional	
Zip   Country   Zip   Country   Zip   Country   S. Electrotation   S. 5.00 May 9e   Added to Fees   S. 129   Zip	23		28			}	v. Cermoate			Fe	e Req	uired	
9. Name and Address of Current Registered Agent  9. Name and Address of Current Registered Agent  11. Name and Address of New Registered Agent  12. Name and Address of New Registered Agent  13. Name  CLAYTON & MCCOLLOH  22. N. PALMETTO AVE.  ORLANDO FI. 32801  14. City  FL  15. Street Address (P.O. Box Number is Not Acceptable)  15. Street Address (P.O. Box Number is Not Acceptable)  16. City  FL  17. Pursuant to the provisions of Sections 617,0502 and 617,1508. Florida Statutes.  18. City  FL  18. Street Address (P.O. Box Number is Not Acceptable)  18. City  FL  18. City  FL  18. Zip Code  19. City  FL  19. Street Address (P.O. Box Number is Not Acceptable)  19. City  FL  10. Pursuant to the provisions of Sections 617,0502 and 617,1508. Florida Statutes.  10. Street Address (P.O. Box Number is Not Acceptable)  10. Name and Address of New Registered Agent  11. Pursuant to the provisions of Sections 617,0502 and 617,1508. Florida Statutes.  10. Street Address (P.O. Box Number is Not Acceptable)  11. Pursuant to the provisions of Sections 617,0502 and 617,1508. Florida Statutes.  12. Conference of Provision Agent		Country Zip Co			ountry 6. Election Campaig			ampaign Financin	g 📇				
CLAYTON & MCCOLLOH  220 N. PALMETTO AVE.  ORLANDO FL 32801  11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statute, the above-handed corporation submits this statement for the purpose of changing its registered orgice 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 orgice 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 orgice 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 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 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 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 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 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 office or registered or registered agent, or both, in the State of Florida. Statutes, the appointment as registered office or registered agent, or both, in the State of Florida. Statutes, the appointment as registered office for registered agent or registered	24	25 29 30			Trust Fund Contribution						Added to Fees		
CLAYTON & MCCOLLOH 220 N. PALMETTO AVE. ORLANDO FI. 32801  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 agent. I am millian with, and accept the onligation of , Section 617,0503, Picholds Statutes.  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS   13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  14. OFFICERS AND DIRECTORS   13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  15. OFFICERS AND DIRECTORS   13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  16. OFFICERS AND DIRECTORS   13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  17. OFFICERS AND DIRECTORS   13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  18. OFFICERS AND DIRECTORS   13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  19. NAME   MACAULEY, NORMAN   13. SIRRET ADDRESS   14. CMT-31.29   Change   Addition   Addit	Name and Address of Current Registered Agent												
220 N. PALMETTO AVE. ORLANDO FI. 32801  8 3  8 4 City FL 85 Zip Code  T1. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits his 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 at an familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  T2. OFFICERS AND DIRECTORS  T1. OFFICERS AND DIRECTORS  T1. OFFICERS AND DIRECTORS IN 12.  T1. OFFICERS AND DIRECTORS IN 12.  T1. OFFICERS AND DIRECTORS IN 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  T1. OFFICERS AND DIRECTORS IN 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  T1. SYMME  T1. OCCOA BEACH FL 32931  T1.		<del> </del>		81	Nam	ne							
220 N. PALMETTO AVE. ORLANDO FI. 32801  8 3  8 4 City FL 85 Zip Code  T1. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits his 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 at an familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  T2. OFFICERS AND DIRECTORS  T1. OFFICERS AND DIRECTORS  T1. OFFICERS AND DIRECTORS IN 12.  T1. OFFICERS AND DIRECTORS IN 12.  T1. OFFICERS AND DIRECTORS IN 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  T1. OFFICERS AND DIRECTORS IN 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.  T1. SYMME  T1. OCCOA BEACH FL 32931  T1.	CLAYTON	82	Street Address (P.O. Box Number is Not Acceptable)										
ORLANDO FL 32801    83													
### City ### St 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 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 and accept the obligations of, Section 617.0502, Principal Statutes.    SIGNATURE		83											
T1. 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 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 with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  Signature, typed or printed name of registered agent and title if applicable.  OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE  PD  MACAULEY, NORMAN  INTEL  PD  MACAULEY, NORMAN  INTEL  VPD  OCOOA BEACH FL 32931  INTEL  CUSIK, JANE  STREET ADDRESS  COTY-51-2P  COCOA BEACH FL  STREET ADDRESS  COTY-51-2P  HOWARD, PAUL  STREET ADDRESS  COTY-51-2P  INTEL  VPD  OCOOA BEACH FL  STREET ADDRESS  COTY-51-2P  MCCARRICK, RON  ATLANTIC AVE  STREET ADDRESS  COTY-51-2P  MCCARRICK, RON  STREET ADDRESS  COTY-51-2P  INTEL  VPD  MCCARRICK, RON  ATLANTIC AVE, #126  COCOA BCH. FL  STREET ADDRESS  COTY-51-2P  INTEL  SROMANNO, PETE  STREET ADDRESS  COTY-51-2P  INTEL  STREET ADDRESS  COCOA BCH. FL  S	01.20.00			9.4	City	,				85	Zin Co	de	
office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Thereby accepts the applications of agent and marrial marrial marrial and accept the obligations of, Section 617.05/05, Priorida Statutory.  SIGNATURE    Command				**	City				FL		<b>_</b> ,p 0.		
12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE PD	office or re agent. I ar	egistered agent or both in the State of	Florida, Such change was auti	norizea av	tne co	ed corpora orporation's	ation submits the s board of dire	his statement for the ctors. I hereby acc	ne purpose of cept the appoi	changii ntment	ng its re as regi	egistered stered	
12. OFFICERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  TITLE PO	SIGNATURE	Signature, typed or printed name of registered agent a	nd title if applicable. (NOTE: R	legistered Ager	nt signatu	ure required wh	hen reinstating)		DATÉ				
TITLE								S/CHANGES TO C	FFICERS AN	D DIRE	CTOR		
1700 N ATLANTIC AVE, #116				1.1 TITLE						Ch	ange	☐ Addition	
1700 N ATLANTIC AVE, #116	NAME	MACAULEY, NORMAN		1.2 NAME									
TITLE VPD DELETE 21 TITLE CUSIK, JANE 22 NAME STREET ADDRESS 1830 N. ATLANTIC AVE 23 STREET ADDRESS CITY-ST-ZIP TO DELETE 31 TITLE CHAnge Addition NAME HOWARD, PAUL 32 NAME STREET ADDRESS CITY-ST-ZIP COCOA BEACH FL 32931 34. CITY-ST-ZIP TITLE VPD DELETE 41 TITLE COCOA BEACH FL 32931 34. CITY-ST-ZIP TITLE VPD DELETE 41 TITLE COCOA BEACH FL 32931 34. CITY-ST-ZIP TITLE VPD STREET ADDRESS CITY-ST-ZIP COCOA BCH. FL 32931 42. STREET ADDRESS CITY-ST-ZIP TITLE S DELETE 51 TITLE COCOA BCH. FL 32931 52. STREET ADDRESS CITY-ST-ZIP TITLE S DELETE 51 TITLE STREET ADDRESS CITY-ST-ZIP COCOA BCH. FL 32931 52. STREET ADDRESS CITY-ST-ZIP COCOA BCH. FL 32931 53. STREET ADDRESS CITY-ST-ZIP COCOA BCH. FL 32931 54. CITY-ST-ZIP COCOA BCH. FL 32931 54. CITY-ST-ZIP COCOA BCH. FL 32931 55. CITY-ST-ZIP COCOA BCH. FL 32931 55. STREET ADDRESS COCOA BCH. FL 32931 55. CITY-ST-ZIP COCOA BCH. FL 32931 55. STREET ADDRESS COCOA BCH. FL 32931 55. CITY-ST-ZIP COCOA BCH. FL 32931 55. STREET ADDRESS COCOA BCH. FL 32931 55. CITY-ST-ZIP COCOA BCH. FL 32931 56. STREET ADDRESS COCOA BCH. FL 32931 55. STREET ADDRESS COCOA BCH. FL 32931		*		1.3 STREE	T ADDRES	ess							
TITLE TOWARD, PAUL  STREET ADDRESS 1700 N. ATLANTIC AVE  STREET ADDRESS 1700 N. ATLAN	CITY-ST-ZIP	COCOA BEACH FL 32931		1.4 CITY-S	T-ZIP								
STREET ADDRESS CITY-ST-ZIP COCOA BEACH FL  2.3 STREET ADDRESS CITY-ST-ZIP TITLE T DELETE 31 TITLE T DELETE TOORNESS TOON N. ATLANTIC AVE., SUITE 252 TITLE TITLE T DELETE TOORNESS TOON N. ATLANTIC AVE., SUITE 252 TITLE TOON N. ATLANTIC AVE. TOON N. AT	TITLE	VPD	☐ DELETE	2.1 TITLE						Ch	ange		
CITY-ST-ZIP COCOA BEACH FL 2 4 CITY-ST-ZIP  TITLE T DELETE 31 TITLE	NAME	CUSIK, JANE		2.2 NAME									
TITLE TOWARD, PAUL STREET ADDRESS 1700 N. ATLANTIC AVE STREET ADDRESS 1700 N. ATLANTIC AVE STREET ADDRESS 1700 N. ATLANTIC AVE., #126  CITY- ST- ZIP  MCCARRICK, RON STREET ADDRESS 1700 N. ATLANTIC AVE., #126  CITY- ST- ZIP  COCOA BCH. FL  STREET ADDRESS 1700 N. ATLANTIC AVE., #126  CITY- ST- ZIP  NAME ROMANO, PETE  STREET ADDRESS 1700 N. ATLANTIC AVE., SUITE 252  CITY- ST- ZIP  TITLE  VPD  Addition  Addition  Addition  Addition  Addition  Addition  Change Addition  Addition  Addition  Addition  Change Addition  Addition  Addition  Change Addition  Ad	STREET ADDRESS	1830 N. ATLANTIC AVE		2.3 STREE	T ADDRES	ess					٠.		
NAME HOWARD, PAUL 32 NAME 32 NAME STREET ADDRESS COCOA BEACH FL 32931 34.CITY-ST-ZIP  NAME MCCARRICK, RON 42 NAME STREET ADDRESS 1700 N. ATLANTIC AVE., #126 43 STREET ADDRESS CITY-ST-ZIP  TITLE S COCOA BCH. FL 44.CITY-ST-ZIP  TITLE S DELETE 51 TITLE SAME STREET ADDRESS CITY-ST-ZIP  TITLE S DELETE 51 TITLE SAME STREET ADDRESS CITY-ST-ZIP  TITLE S DELETE 51 TITLE SAME STREET ADDRESS CITY-ST-ZIP  TITLE S SAME STREET ADDRESS CITY-ST-ZIP  TITLE S SAME STREET ADDRESS CITY-ST-ZIP  TITLE VPD SAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME CUSIK, JANE 62 NAME  1700 N. ATLANTIC AVE STREET ADDRESS STREET ADDRESS STREET ADDRESS CITY-ST-ZIP  TITLE VPD SAME STREET ADDRESS CITY-ST-ZIP  TITLE NAME CUSIK, JANE 62 NAME  1700 N. ATLANTIC AVE STREET ADDRESS CITY-ST-ZIP  TITLE NAME CUSIK, JANE 63 STREET ADDRESS CITY-ST-ZIP  TITLE NAME CUSIK, JANE 64 CITY-ST-ZIP  TITLE NAME CUSIK, JANE 64 CITY-ST-ZIP  TITLE NAME CUSIK, JANE 64 CITY-ST-ZIP  TITLE NAME CUSIK, JANE 65 STREET ADDRESS CITY-ST-ZIP  TITLE NAME CUSIK NAME CUSIK NAME CUSIK NAME CUSIK NAME CUSIK NAME CUSIK	CITY-ST-ZIP ~~	COCOA BEACH FL		2 4 CfTY-S	ST-ZIP								
STREET ADDRESS CITY- ST-ZIP TITLE VPD DAME MCCARRICK, RON STREET ADDRESS CITY- ST-ZIP TITLE NAME COCOA BEACH FL 32931  TITLE NAME MCCARRICK, RON  1700 N. ATLANTIC AVE., #126 COCOA BCH. FL  1700 N. ATLANTIC AVE., #126 COCOA BCH. FL  1700 N. ATLANTIC AVE., \$126  COCOA BCH. FL  1700 N. ATLANTIC AVE., \$126  COCOA BCH. FL  1700 N. ATLANTIC AVE., SUITE 252  CITY-ST-ZIP TITLE VPD	TITLE	T	☐ DELETE	31 TITLE						☐ Ch	ange	☐ Addition	
COCOA BEACH FL 32931  TITLE VPD   DELETE   41 TITLE   Change   Addition   NAME   MCCARRICK, RON   4.2 NAME   STREET ADDRESS   1700 N. ATLANTIC AVE, #126   44 CITY-ST-ZIP   TITLE   S   DELETE   51 TITLE   Change   Addition   NAME   ROMANO, PETE   52 NAME   STREET ADDRESS   1700 N. ATLANTIC AVE, SUITE 252   5.3 STREET ADDRESS   CITY-ST-ZIP   COCOA BCH. FL 32931   54 CITY-ST-ZIP   TITLE   VPD   COCOA BCH. FL 32931   62 NAME   STREET ADDRESS   1700 N. ATLANTIC AVE   63 STREET ADDRESS   CITY-ST-ZIP   COCOA BEACH FL 32931   64 CITY-ST-ZIP   TITLE   COCOA BEACH FL 32931   64 CITY-ST-ZIP   67 CITY ST-ZIP   TITLE   COCOA BEACH FL 32931   64 CITY-ST-ZIP   67 CITY ST-ZIP   67 CITY ST-Z	NAME (	HOWARD, PAUL		3.2 NAME		l							
TITLE VPD DELETE 4.1 TITLE Addition  NAME MCCARRICK, RON 4.2 NAME  STREET ADDRESS 1700 N. ATLANTIC AVE., #126 4.3 STREET ADDRESS  CITY-ST-ZIP COCOA BCH. FL 4.4 CITY-ST-ZIP  NAME ROMANO, PETE 5.1 TITLE 5.2 NAME  STREET ADDRESS 1700 N. ATLANTIC AVE., SUITE 252 5.3 STREET ADDRESS  CITY-ST-ZIP COCOA BCH. FL 32931 5.4 CITY-ST-ZIP  NAME CUSIK, JANE 6.3 STREET ADDRESS  STREET ADDRESS 1700 N. ATLANTIC AVE 6.3 STREET ADDRESS  CITY-ST-ZIP COCOA BEACH FL 32931 6.4 CITY-ST-ZIP  COCOA BEACH FL 32931 6.4 CITY-ST-ZIP  COCOA BEACH FL 32931 6.4 CITY-ST-ZIP  COCOA BEACH FL 32931 6.4 CITY-ST-ZIP  TOO N. ATLANTIC AVE 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP  ALL hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes.   further certify that the information	STREET ADDRESS	1700 N. ATLANTIC AVE		3.3 STREET ADDRESS		ESS							
NAME MCCARRICK, RON STREET ADDRESS 1700 N. ATLANTIC AVE., #126 CITY-ST-ZIP COCOA BCH. FL  SNAME ROMANO, PETE STREET ADDRESS 1700 N. ATLANTIC AVE., SUITE 252 CITY-ST-ZIP COCOA BCH. FL 32931 TITLE VPD NAME CUSIK, JANE STREET ADDRESS 1700 N. ATLANTIC AVE. STREET ADDRESS CITY-ST-ZIP COCOA BCH. FL 32931  TITLE VPD ADDELETE 6.1 TITLE NAME CUSIK, JANE STREET ADDRESS 1700 N. ATLANTIC AVE G.3 STREET ADDRESS CITY-ST-ZIP COCOA BEACH FL 32931  14. L bereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes.   further certify that the information	CITY-ST-ZIP	COCOA BEACH FL 32931	_	3.4. CITY-5	ST-ZIP								
STREET ADDRESS CITY-ST-ZIP COCOA BCH. FL  SCHAME ROMANO, PETE STREET ADDRESS 1700 N. ATLANTIC AVE., SUITE 252 CITY-ST-ZIP COCOA BCH. FL 32931  TITLE VPD NAME CUSIK, JANE STREET ADDRESS 1700 N. ATLANTIC AVE STREET ADDRESS STREET ADDRESS CITY-ST-ZIP COCOA BEACH FL 32931  TITLE VPD AME CUSIK, JANE STREET ADDRESS 1700 N. ATLANTIC AVE 63 STREET ADDRESS CITY-ST-ZIP COCOA BEACH FL 32931  64 CITY-ST-ZIP  14. L 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	TITLE	VPD	☐ DELETE	4.1 TITLE						Ch	ange	Addition	
COCOA BCH. FL  TITLE  S  NAME  ROMANO, PETE  STREET ADDRESS  CITY-ST-ZIP  COCOA BCH. FL 32931  TOR N. ATLANTIC AVE., SUITE 252  COCOA BCH. FL 32931  STREET ADDRESS  TITLE  VPD  NAME  CUSIK, JANE  STREET ADDRESS  TOO N. ATLANTIC AVE  COCOA BCH. FL 32931  S4 CITY-ST-ZIP  6.1 TITLE  NAME  CUSIK, JANE  6.2 NAME  6.3 STREET ADDRESS  CITY-ST-ZIP  COCOA BEACH FL 32931  6.4 CITY-ST-ZIP  COCOA BEACH FL 32931  6.3 STREET ADDRESS  6.4 CITY-ST-ZIP  COCOA BEACH FL 32931  14. Lhereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes.   further certify that the information	NAME	MCCARRICK, RON		4. 2 NAME									
COCOA BCH. FL  TITLE  S  NAME  ROMANO, PETE  STREET ADDRESS  CITY-ST-ZIP  COCOA BCH. FL 32931  TOR N. ATLANTIC AVE., SUITE 252  COCOA BCH. FL 32931  STREET ADDRESS  TITLE  VPD  NAME  CUSIK, JANE  STREET ADDRESS  TOO N. ATLANTIC AVE  COCOA BCH. FL 32931  S4 CITY-ST-ZIP  6.1 TITLE  NAME  CUSIK, JANE  6.2 NAME  6.3 STREET ADDRESS  CITY-ST-ZIP  COCOA BEACH FL 32931  6.4 CITY-ST-ZIP  COCOA BEACH FL 32931  6.3 STREET ADDRESS  6.4 CITY-ST-ZIP  COCOA BEACH FL 32931  14. Lhereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes.   further certify that the information	STREET ADDRESS	1700 N. ATLANTIC AVE., #126		4.3 STREE	T ADDRES	ESS							
TITLE S DELETE 5.1 TITLE 5.1 TITLE 5.2 NAME  ROMANO, PETE 5.2 NAME  STREET ADDRESS 1700 N. ATLANTIC AVE., SUITE 252 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP COCOA BCH. FL 32931 5.4 CITY-ST-ZIP CUSIK, JANE 6.1 TITLE NAME CUSIK, JANE 6.3 STREET ADDRESS 1700 N. ATLANTIC AVE 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP COCOA BEACH FL 32931 1.4. Lhereby 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	CITY-ST-ZIP	COCOA BCH. FL		4.4 CITY-S	T-ZIP								
STREET ADDRESS 1700 N. ATLANTIC AVE., SUITE 252  COCOA BCH. FL 32931  TITLE  VPD  CUSIK, JANE  STREET ADDRESS 1700 N. ATLANTIC AVE.  CUSIK, JANE  STREET ADDRESS 1700 N. ATLANTIC AVE  63 STREET ADDRESS  CITY-ST-ZIP  COCOA BEACH FL 32931  64 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			☐ DELETE	5.1 TITLE						□ Ch	ange	Addition	
CITY-ST-ZIP  COCOA BCH. FL 32931  5.4 CITY-ST-ZIP  6.1 TITLE  VPD  NAME  CUSIK, JANE  STREET ADDRESS  1700 N. ATLANTIC AVE  6.3 STREET ADDRESS  CITY-ST-ZIP  COCOA BEACH FL 32931  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	NAME	ROMANO, PETE		5.2 NAME									
TITLE VPD DELETE 6.1 TITLE 6.2 NAME CUSIK, JANE STREET ADDRESS 1700 N. ATLANTIC AVE 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP COCOA BEACH FL 32931 6.4 CITY-ST-ZIP COC	STREET ADDRESS	1700 N. ATLANTIC AVE., SUITE 2	252	5.3 STREE	T ADDRES	ESS							
TITLE VPD DELETE 6.1 TITLE 6.2 NAME CUSIK, JANE STREET ADDRESS 1700 N. ATLANTIC AVE 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP COCOA BEACH FL 32931 6.4 CITY-ST-ZIP COC	CITY-ST-ZIP	COCOA BCH. FL 32931		5.4 CITY-S	T-ZIP								
STREET ADDRESS 1700 N. ATLANTIC AVE CTY-ST-ZIP COCOA BEACH FL 32931  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			DELETE	6.1 TITLE						☐ Ch	ange	☐ Addition	
CITY-ST-ZIP  COCOA BEACH FL 32931  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	NAME	CUSIK, JANE		6.2 NAME									
CITY-ST-ZIP COCOA BEACH FL 32931 64 CITY-ST-ZIP 64 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	STREET ADDRESS	1700 N. ATLANTIC AVE		6.3 STREE	TADDRE	ESS							
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	CITY ST. 7ID	COCOA BEACH FL 32931											
	14. I hereby o	certify that the information supplied with	this filing does not qualify for t	he exempt	ion sta	ated in Sec	tion 119.07(3)	(i), Florida Statute	s. I further cer	tify tha	the in	formation	

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.

MACAULAY 4-28-99

Applied For

\$8.75 Additional

Not Applicable