FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997

Principal Place of Business



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N21064

(3)

Mailing Address

SILVER SANDS BEACH AND RACQUET CLUB TWO CONDOMINIUM ASSOCIATION, INC.

6600 SUNSET WAY #100 ST PETERSBURG BEACH FL 33706 US		6595 SUNSET WAY ST PETERSBURG BEACH US	ST PETERSBURG BEACH FL 33706-2179				Incorporated or Qualified 06/09/1987	3a. Da	le of La)3/26/	ist Re /190	эрогі 9 6
	ace of Business	2a. Mailing Address				4. FEI	Number 59-2895059				plied For
Suite, Apt	#. etc.	Suite, Apt. #, etc.				•	39.5093039		CO 7		t Applicable
22	,	27				5. Cert	ificate of Status Desired				quired
City & State		City & State				I	tion Campaign Financing t Fund Contribution				May Be o Fees
Zıp 24	Country 25	Zip 29	29 30			8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No					
	9. Name and Address o	f Current Registered Agent		. 1		10. Nan	se and Address of New Re	gistered A	gent		
			8	1	Name						
ZACUR, RICHARD A. 5200 CENTRAL AVE			8:	82 Street Address (P.O. Box Number is Not Accepta				ole)			
	RSBURG FL 33713		8:	3		·					
			8	4	City				85	Zip (Code
		0.7.0500		_	•			<u> </u>			
office or re	egistered agent, or both, in t	617.0502 and 617.1508, Florida State the State of Florida. Such change was the obligations of, Section 617.0503, F	authorized t	Q۷	the corpora	ration's board	mits this statement for the p of directors. I hereby accep	ot the appo	change	ng its t as i	registered registered
SIGNATURE	Signature, typied or printed name of re-	regional spect and tills if avolicable //MC	YE: Bonishrad &	000	nl eignghus sag	quired when reinsta	Kon)	DATE			
12.		ERS AND DIRECTORS	13.	Gen	ii eithrainie iech		TIONS/CHANGES TO OFFIC		DIREC	TOR	S IN 12
TITLE	TD	☐ DELETE	1.1 THLE		··· · · · · · · · · · · · · · · · · ·	····			☐ Char		Addition
NAME	ROBBINS, ROBERT		1.2 NAME	=						_	_
STREET ADDRESS	6595 SUNSET WAY		1.3 STRE	ET A	ADDRESS						:
CITY-ST-ZIP	ST PETE BEACH FL		1.4 CITY-	-ST	r-ZIP	·			:		
TITLE	SD	☐ DELETE 2.		2.1 TITLE					Char	1ge	Addition
NAME	STEPHANS, ED		2.2 NAME	E							
STREET ADDRESS	6595 SUNSET WAY		2.3 STAE	ET A	ADDRESS						
CHTY - ST - ZIP	ST PETE BEACH FL 2.		2. 4 CITY	- 51	T-ZIP						
TITLE	VD	DELETE	3.1 TITLE				- i		Char	ige	☐ Addition
NAME	REMINGTON, CARL		3.2 NAME	E							
STREET ADDRESS	6595 SUNSET WAY		3.3 STREE	ET A	ADDRESS						
C(TY-ST-7)P	ST PETE BEACH FL		3.4. CITY	- 51	T-21P						
TITLE	D	DELETE	4.1 TITLE						Char	не	Addition
NAME	MILCHAN, DAVID		4. 2 NAM	E							
STREET ADDRESS	6595 SUNSET WAY		4.3 STREE	ET A	ADDRESS	•					
CITY - ST - ZIP	ST PETE BEACH FL		4.4 CITY-	-ST	7-ZIP						
TITLE	PD	☐ DELETE	5.1 TITLE						Char	ıpe	Addition
NAME	PYLE, WILLIAM		5.2 NAME	Ē							
STREET ADDRESS	6595 SUNSET WAY		5.3 STREE	ET A	address						
CHTY - ST - ZIP	ST PETE BEACH FL		5.4 CITY-	ST	í-ZIP						
THTLE		☐ DELETE	6.1 TITLE						Char	1ge	Addition
NAME			6.2 NAME	E							
STREET ADDRESS			6.3 STRE	ET /	ADDRESS						

14. I do 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.

6.4 CITY-ST-ZIP

SIGNATURE:

ATURE AND TYPED OR BRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/7/97

Davtima Phone # narrosen

FILED

Mar 12 1997 8:00am

Secretary of State