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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

(3)

ST. LUCIA CONDOMINIUM ASSOCIATION, INC.

FILED Jun 16 1997 8:00am Secretary of State



| Principal Place of Business | | Mailing Ac | Mailing Address | | | | ? 100/JJB1 BJE 48080 JJDJ1 BJB10 JJB1 | S Bist BIBII GIBIT | 91011 61811 81811 84841 1841 | ı |
|--|-------------------------------|--------------|---|-----------------------|----------|---------|---|--------------------|------------------------------------|--|
| 6361 PELICAN NAPLES FL 33 | | | 6361 PELICAN BAY BV NAPLES FL 34108-7134 | | | | | | | |
| | | | | | | | 3. Date Incorporated or Qualified 09/10/1987 | 3a. Date o | of Last Report 4/10/1996 | |
| 2. Principal P | lace of Business | 2a. Mailing | Address | | | | 4. FEt Number 65-0038841 | | Applied For Not Applicable | le |
| Suite, Apt. | #, etc. | - | Suite, Apt. #, etc. | | | | 5. Certificate of Status Desired | | \$8.75 Additional Fee Required | |
| City & State | е | City & | City & State | | | | Election Campaign Financing Trust Fund Contribution | П | \$5.00 May Be Added to Fees | |
| Zip 24 | Country 26 | Zip | | Country 30 | , | | 8. This corporation has liability for | | cunder s. 199.032, | |
| (24 1 | 9. Name and Address of Currer | | | 30 | - | | D. Name and Address of New Ro | | | - |
| | | | | B1 | Name | | | | | ╡ |
| | S, ROBERT G. | | | 82 | Street | Address | (P.O. Box Number is Not Accepta | ble) | | \dashv |
| 3003 91 SUITE 2 | th St. N. 270 | | | | | | | | | \dashv |
| NAPLES | S FL 33940 | | | 84 | City | | | FL | 85 Zip Code | \dashv |
| 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 reinstaling) DATE | | | | | | | | | | |
| 12, | | ID DIRECTORS | | 13. | | | ADDITIONS/CHANGES TO OFFI | | IRECTORS IN 12 | ન _્ |
| TITLE | PD | | DELETE | 1.1 TITLE | | PL | 7 | | Change Additio | <u>, </u> |
| NAME | JAY, RICHARD | 1 | • | 1.2 NAME | | But | sh James NPElian Boy B plas FL 34108 | 21.1 701 | , | |
| STREET ADDRESS | 6361 PELICAN BAY BLVD. | 705 | | 1.3 STREET | ADDRESS | 630 | S Perican Duy | , | | |
| CITY-ST-ZIP | NAPLES FL | | | 1.4 CITY - S | 17-21P | Na | plas FL 34108 | <u>;</u> | | _ 8 |
| TIFLE | VD | | DELETE | 2 1 TITLE | | 7 | | | Change | yn] (|
| NAME | JONES, ROSE | | | 2.2 NAME | | | | | | - |
| STREET ADDRESS | 6361 PELICAN BAY BV 902 | | | 2.3 STREET | ADDRESS | ļ. | | | | - { |
| CITY-ST-ZIP | NAPLES FL SD | | DELETE | 2. 4 CITY - | ST-ZIP | سر نعد | | | Change Additio | _ |
| TITLE | MANZO, LOUIS | 7 | DECETE | 3.1 TITLE 3.2 NAME | | | edericks, Robert | | · ' / | " |
| NAME STREET ADDRESS | 6361 PELICAN BAY BLVD # | 11 | | 3.3 STREET | *OODECC | 2:34 | edaricks, Koberj U Peficon Day | Blod. | 305 | ľ |
| 1 | NAPLES FL | * * | | 3.4. DITY- | | 1/2 | mes A. Bush | | | 1 |
| CITY-ST-ZIP | 0 | | DELETE | 4.1 TiTLE | 91- £IF | ZIII | 1910 10 01100 | | Change | 'n |
| NAME | HALSETH, ROBERT | | _ | 4. 2 NAME | | 1 | 1 -t out | | - | 1 |
| STREET ADDRESS | 6361 PELICAN BAY BV 605 | | | 4.3 STREET | ADDRESS | 180 | bett Robert | glodin | 1605 | |
| CITY-ST-ZIP | NAPLES FL | | | 4.4 CITY - 5 | ST-ZIP | 64 | APAFS, FAL 3 | 4108 | | |
| TITLE | 0 | | DELETE | 5.1 TITLE | | 10 | Pelisan Ray APAFS, FAI 3. Polison Boy Aples FL 34108 | | Change Addition | л |
| NAME | BOURGRAF, EL | | | 5.2 NAME | | Ma | rich Exame | Blud # | 1505 | |
| STREET ADDRESS | 6361 PELICAN BAY BV PH3 | | | 5.3 STREET | ADDRESS | 63 | 61 Penor pag | *** | | |
| CITY-ST-ZIP | NAPLES FL | | | 5.4 CITY-8 | 31 - ZIP | Na | PICO 61 34108 | | | |
| TITLE | D | | DELETE | 6.1 TITLE | | [| · | | Change | ın [|
| NAME | ARMSTRONG, ALFRED | | | 6.2 NAME | | | | | | |
| STREET ADDRESS | 6361 PELICAN BAY BLVD # | 1401 | | 6.3 STREET | ADDRESS | | | | | Į |

CITY-ST-ZIP NAPLES FL

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 Chaptes 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

12 Officers and Directors

13 Additions and Changes in 12

TD Del Thomas Krigbaum 6361 Pelican Bay Blvd #404 Naples FL 34108 D Add John Tanner 6361 Pelican Bay Blvd #402 naples fl 34108