

FILE NOW: FILING FEE IS \$61.25

FILED  
Mar 17 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # N26802 (1)  
1. Corporation Name  
MATANZAS SHORES OWNER'S ASSOCIATION, INC.



Principal Place of Business Mailing Address  
P O BOX 352572 PALM COAST FL 32135 P O BOX 352572 PALM COAST FL 32135

3. Date Incorporated or Qualified  
06/06/1988

4. FEI Number  
59-2944951

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 Country 28 Zip Country

24 Zip 25 Country 29 Zip 30 Country

9. Name and Address of Current Registered Agent

WHITE, WILLIAM A  
PALM COAST PROPERTY MGMT  
296 PALM COAST PKWY  
PALM COAST FL 32137

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 *William A. White* DATE 2/13/98

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS	
TITLE	DP <input checked="" type="checkbox"/> DELETE
NAME	AMARO, NICK
STREET ADDRESS	ONE CORPORATE DRIVE
CITY-ST-ZIP	PALM COAST FL
TITLE	VPO <input type="checkbox"/> DELETE
NAME	BUTLER, SAM
STREET ADDRESS	EXECUTIVE OFFICES, 1 CORPORATE DRIVE
CITY-ST-ZIP	PALM COAST FL
TITLE	DST <input checked="" type="checkbox"/> DELETE
NAME	CALLEA, CHARLES
STREET ADDRESS	ONE CORPORATE DRIVE
CITY-ST-ZIP	PALM COAST FL
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	P/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	WILLIAM F. HARKINS
1.3 STREET ADDRESS	P.O. Box 352572 N/A
1.4 CITY-ST-ZIP	PALM COAST, FL 32135
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	S/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	DAVID HUSSY
3.3 STREET ADDRESS	1 CORPORATE DRIVE
3.4 CITY-ST-ZIP	PALM COAST, FL 32137
4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	CHARLES R. FAULKNER
4.3 STREET ADDRESS	Box 352572 N/A
4.4 CITY-ST-ZIP	PALM COAST, FL 32135
5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	JAMES E. GARDNER
5.3 STREET ADDRESS	1 CORPORATE DRIVE
5.4 CITY-ST-ZIP	PALM COAST, FL 32137
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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, or on an attachment with an address.

SIGNATURE: *Sam Butler, Jr* 2.6.98 904.445.2673

CR2E037 (10/97)