

**FILE NOW: FILING FEE IS \$61.25**

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1996**



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

**DOCUMENT # N28737 (7)**

1. Corporation Name

**SAN SEBASTIAN HARBOR HOMEOWNER'S ASSOCIATION, IN C.**



Principal Place of Business

Mailing Address

130 SINGAPORE RD.  
PUNTA GORDA FL 33950

130 SINGAPORE RD.  
PUNTA GORDA FL 33950

3. Date Incorporated or Qualified  
**10/06/1988**

3a. Date of Last Report  
**04/06/1995**

21. Principal Place of Business

26. Mailing Address

4. FEI Number  
**65-0121116**

Applied For  
Not Applicable

22. Suite, Apt. #, etc.

27. Suite, Apt. #, etc.

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

23. City & State

28. City & State

6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

24. Zip

25. Country

29. Zip

30. Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**QUIDONE, THOMAS J.  
238 SINGAPORE RD  
1  
PUNTA GORDA FL 33950**

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE  DELETE  
NAME **S GOLD, ELEANOR**  
STREET ADDRESS **222 RIVIERA COURT**  
CITY-ST-ZIP **PUNTA GORDA FL**

1.1 TITLE  Change  Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE  DELETE  
NAME **T QUIDONE, THOMAS J.**  
STREET ADDRESS **238 SINGAPORE RD**  
CITY-ST-ZIP **PUNTA GORDA FL**

2.1 TITLE  Change  Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE  DELETE  
NAME **VD MAHANAY, HERB**  
STREET ADDRESS **3830 BARNEGAT DRIVE**  
CITY-ST-ZIP **PUNTA GORDA FL**

3.1 TITLE  Change  Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE  DELETE  
NAME ~~VD LEHTINEN, BETTY~~  
STREET ADDRESS ~~316 SINGAPORE RD~~  
CITY-ST-ZIP ~~PUNTA GORDA FL~~

4.1 TITLE  Change  Addition  
4.2 NAME **VD ANDY ALLAIN**  
4.3 STREET ADDRESS **224 RIVIERA COURT**  
4.4 CITY-ST-ZIP **PUNTA GORDA FL 33950**

TITLE  DELETE  
NAME ~~PD GARMS, DOLORES~~  
STREET ADDRESS ~~320 SINGAPORE ROAD~~  
CITY-ST-ZIP ~~PUNTA GORDA FL~~

5.1 TITLE  Change  Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE  DELETE  
NAME **PD ARNOLD IANNUZZI**  
STREET ADDRESS **230 RIVIERA COURT**  
CITY-ST-ZIP **PUNTA GORDA FL 33950**

6.1 TITLE  Change  Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: Thomas J. Quidone  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

26 FEB 96 941-5751620  
Date Daytime Phone #

CR2E037 (12/95)