

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 # N45914

(1)

1. Corporation Name

THE SAND KEY CIVIC ASSOCIATION, INC.



Principal Place of Business

1340 GULF BLVD-2S
CLEARWATER FL 34630

Mailing Address

1340 GULF BLVD-2S
CLEARWATER FL 34630

3. Date Incorporated or Qualified
11/06/1991

3a. Date of Last Report
02/06/1995

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

4. FEI Number
59-3095881

Applied For
Not Applicable

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

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

NARDI, MICHEL
915 CHESTNUT STREET
CLEARWATER FL 34616

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

TITLE D ☒ DELETE
NAME CONTI, JOSEPH
STREET ADDRESS 1660 GULF BLVD
CITY - ST - ZIP CLEARWATER FL

TITLE D ☒ DELETE
NAME HENION, ROBERT
STREET ADDRESS 1290 GULF BLVD
CITY - ST - ZIP CLEARWATER FL

TITLE D ☐ DELETE
NAME RUBEN, RICHARD
STREET ADDRESS 1430 GULF BLVD
CITY - ST - ZIP CLEARWATER FL

TITLE D ☒ DELETE
NAME NARDI, MICHEL
STREET ADDRESS 915 CHESTNUT ST
CITY - ST - ZIP CLEARWATER FL

TITLE D ☐ DELETE
NAME CALIO, JOSEPH
STREET ADDRESS 1290 GULF BLVD
CITY - ST - ZIP CLEARWATER FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☐ Change ☒ Addition
1.2 NAME JAMES WARNER
1.3 STREET ADDRESS 1340 GULF BLVD. - 2S
1.4 CITY - ST - ZIP CLEARWATER, FLA 34630

2.1 TITLE D ☐ Change ☒ Addition
2.2 NAME NICK FRITSH
2.3 STREET ADDRESS 1340 GULF BLVD.
2.4 CITY - ST - ZIP CLEARWATER, FLA 34630

3.1 TITLE D ☐ Change ☒ Addition
3.2 NAME GEORGE STARK
3.3 STREET ADDRESS 1351 GULF BLVD
3.4 CITY - ST - ZIP CLEARWATER, FLA. 34630

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

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

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)