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**SECRETARY OF STATE  
TALLAHASSEE, FLORIDA**

CORPORATION ANNUAL REPORT <b>1995</b>		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # N48006 (3)**

1. Corporation Name  
**TRANQUILITY BASE CONDOMINIUM ASSOCIATION, INC.**

Principal Place of Business <b>375-385 S ATLANTIC AVE ORMOND BEACH FL 32176</b>	Mailing Address <b>648 S. RIDGEWOOD AVE. DAYTONA BCH. FL 32114 US</b>
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DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified <b>03/24/1992</b>	3a. Date of Last Report <b>08/02/1994</b>
4. FEI Number <b>NOT APPLICABLE</b>	Applied For Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
7. Nonprofit with IRS-501(c)(3) Tax Exempt Status <input type="checkbox"/>	<b>\$68.75 Supplemental Fee Not Required</b>
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business	2a. Mailing Address
21. Suits, Apt. #, etc.	26. Suits, Apt. #, etc.
22. City & State	27. City & State
23. Zip	28. Zip
24. Country	29. Country
25. Zip	30. Country

9. Name and Address of Current Registered Agent

**VEDDER, MATTHEW K.  
375-385 S ATLANTIC AVE  
ORMOND BEACH FL 32176**

10. Name and Address of New Registered Agent

81. Name
82. Street Address (P.O. Box Number is Not Acceptable)
83. City
84. State <b>FL</b>
85. Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-stating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VEDDER, JOHN E. S	1.2 NAME	
STREET ADDRESS	375 S. ATLANTIC AVE.	1.3 STREET ADDRESS	
CITY-ST-ZIP	ORMOND BEACH FL	1.4 CITY-ST-ZIP	
TITLE	DS	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VEDDER, MATTHEW K.	2.2 NAME	
STREET ADDRESS	375 S. ATLANTIC AVE.	2.3 STREET ADDRESS	
CITY-ST-ZIP	ORMOND BEACH FL	2.4 CITY-ST-ZIP	
TITLE	DT	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	VEDDER, DAVID F.	3.2 NAME	
STREET ADDRESS	648 S. RIDGEWOOD AVE.	3.3 STREET ADDRESS	
CITY-ST-ZIP	DAYTONA BEACH FL	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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 110.07(3)(b), 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 017, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: MATTHEW K. VEDDER (DG) Date: 1/27/95 Telephone: 984-672-3600

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR