

FILE NOW: FILING FEE IS \$61.25

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May 06, 1999 8:00 am
Secretary of State

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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N93000004932

1. Corporation Name

THE DOMINICA AT DOLPHIN CAY OWNER'S ASSOCIATION, INC.

%Rampart Properties
10033 9th St.N. 2nd Floor
St. Petersburg, FL 33716

5 N 505049-90146-11



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	10/25/1993	
22	City & State	27	City & State	4. FEI Number	
23	Zip	28	Country	59-3215871	
24	Country	29	Country	Applied For	
				Not Applicable	
				5. Certificate of Status Desired <input type="checkbox"/>	
				\$8.75 Additional Fee Required	
				6. Election Campaign Financing <input type="checkbox"/>	
				\$5.00 May Be Added to Fees	

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
Brian K. Smith 10033 9th St.N. 2nd Floor St. Petersburg, Fl 33716				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: Brian K. Smith BRIAN K. SMITH DATE: 4-30-99

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	TD	1.1 TITLE	TD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JUDY HEUSTIS	1.2 NAME	Bob Heustis
STREET ADDRESS	5901 SUN BLVD #203	1.3 STREET ADDRESS	4750 Dolphin Cay Ln. #101
CITY-ST-ZIP	ST. PETERSBURG FL 33715	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	JAMES SCHLANDER	2.2 NAME	Charles Grimm
STREET ADDRESS	5901 SUN BLVD #203	2.3 STREET ADDRESS	4750 Dolphin Cay Ln. #304
CITY-ST-ZIP	ST. PETERSBURG FL 33715	2.4 CITY-ST-ZIP	
TITLE	SD	3.1 TITLE	SD <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SIMMONS, JANICE L	3.2 NAME	None
STREET ADDRESS	4750 DOLPHIN AY LANE, SOUTH #203	3.3 STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL	3.4 CITY-ST-ZIP	
TITLE	PD	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	POLONSKI, VICTOR	4.2 NAME	
STREET ADDRESS	4750 DOLPHIN CAY LANE SO. #107	4.3 STREET ADDRESS	
CITY-ST-ZIP	ST. PETERSBURG FL	4.4 CITY-ST-ZIP	
TITLE	VP	5.1 TITLE	VP <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BAUMEL, RAOUL G.	5.2 NAME	Jim Schlander
STREET ADDRESS	4750 DOLPHIN CAY LANE SOUTH, #303	5.3 STREET ADDRESS	4750 Dolphin Cay Ln. #206
CITY-ST-ZIP	ST. PETERSBURG FL	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 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, with all other like empowered.

SIGNATURE: Victor Polonski DATE: 4/13/99 DAYTIME PHONE #

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (11/98)