FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 **DOCUMENT #**

Principal Place of Business

N94000005622 (5)

Mailing Address

OSPREY POINTE AT DOLPHIN CAY OWNER'S ASSOCIATION

10033 9TH STREET N. 10033 9TH STREET N. 2ND FLOOR 2ND FLOOR ST. PETERSBURG FL 33716 ST. PETERSBURG FL 33716-3804 3. Date Incorporated or Qualified 11/14/1994 3a. Date of Last Report 05/01/1996 2. Principal Place of Business 2a. Mailing Address Applied For 21 26 Not Applicable Suite, Apt. #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State \$5.00 May Be 6. Election Campaign Financing \Box 23 28 Trust Fund Contribution Added to Fees Zıp Country Zip Country This corporation has liability for intangible tax under s. 199.032, Yes No 29 30 Florida Statutes 24 25 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 BRIAN K. SMITH Street Address (P.O. Box Number is Not Acceptable) 82 10033 9TH STREET N. 83 2ND FLOOR ST. PETERSBURG FL 33716 84 City 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 regulted when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. 96/6) ☐ Change ☐ Addition TITLE DELETE 1.1 TITLE BARRON, ADELE 1.2 NAME NAME 4801 OSPREY DRIVE S. 1.3 STREET ADDRESS STREET ADDRESS ST PETERSBURG FL CITY-ST-ZIP 1.4 City-St-ZIP DVP DELETE Change Addition TITLE 2.1 TITLE Attached WILLIAMS, BEATRIZ 2.2 NAME NAME 4830 OSPREY DRIVE S. STREET ADDRESS 2.3 STREET ADDRESS ST PETERSBURG FL CITY - S1 - ZIP 2.4 CITY-ST-ZIP DELETE Change Addition 3.1 TITLE TITLE MAYSE, ROBERT 3.2 NAME NAME 4850 OSPREY DRIVE S. STREET ADDRESS 3.3 STREET ADDRESS ST PETERSBURG FL DITY-ST-ZIP 3.4. CITY - ST - ZIP DELETE Addition 4.1 TITLE Change TITLE DINGMAN, HARRY 4. 2 NAME NAME 4830 OSPREY DRIVE S. 4.3 STREET ADDRESS STREET ADDRESS ST. PETERSBURG FL CITY-S1-ZIP 4.4 CITY - ST-ZIP DELETE Change Addition D TITLE 5.1 TITLE BASTYR, DENNIS NAME 5.2 NAME 4801 OSPREY DRIVE S. STREET ADDRESS 5.3 STREET ADDRESS ST. PETERSBURG FL CITY-ST-ZIP 5.4 CITY - ST - ZIP DELETE Change Addition 6.1 TITLE TITLE LANDSTRA, ROBERT NAME 6.2 NAME 4850 OSPREY DRIVE S. **6.3 STREET ADDRESS** STREET ADDRESS ST. PETERSBURG FL 6.4 CITY-ST-ZIP CITY-ST-7IP

14. I do 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 cath; 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 attainment with an address.

Daytime Phone # 0051205

Date

FILED

May 20 1997 8:00am

Secretary of State

D Dotzour, Ken 10033 9th Street North St. Petersburg, Florida

DP Barron, Adele 10033 9th Street North St. Petersburg, Florida

BVP Williams, Beatrice 10033 9th Street North St. Petersburg, Florida

DT Mayse, Robert 10033 9th Street North St. Petersburg, Florida

DS Dingman, Harry 10033 9th Street North St. Petersburg, Florida

D Bastyr, Dennis 10033 9th Street North St. Petersburg, Florida

D Landstra, Robert 10033 9th Street North St. Petersburg, Florida