FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT
1995

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

APPROVED AND FILED

95 MAY -1 AM 9:23

SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # **742188** **(6)**

1. Corporation Name

GREENCROFT CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
5023 RINGWOOD MDW SARASOTA FL 34287 US	5023 RINGWOOD MDW SARASOTA FL 34287 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/24/1978
3a. Date of Last Report: 04/26/1994
4. FEI Number: 59-1724685 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21 Gulf Coast Management	26 Gulf Coast Management
Suite, Apt. #, etc. 22 2831 Ringling Blvd	Suite, Apt. #, etc. 27 2831 Ringling Blvd
City & State 23 Sarasota, FL.	City & State 28 Sarasota, FL.
Zip 24 34237 Country 25 USA	Zip 29 34237 Country 30 USA

9. Name and Address of Current Registered Agent

GULF COAST MANAGEMENT OF SARASOTA
5023 RINGWOOD MDW
SUITE 106
SARASOTA FL 34287

10. Name and Address of New Registered Agent

81 Name: Gulf Coast Management
82 Street Address (P.O. Box Number is Not Acceptable): 2831 Ringling Blvd.
83: Suite 2187
84 City: Sarasota FL 85 Zip Code: 34237

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: A Glasser JC Garrett 4/26/95
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	D	11 TITLE	PD ☑ Change ☐ Addition
NAME	GLASSER, RONA	12 NAME	Rona Glasser
STREET ADDRESS	4911 GREENCROFT RD	13 STREET ADDRESS	4911 Greencroft Rd
CITY-ST-ZIP	SARASOTA, FL 00000 34235	14 CITY-ST-ZIP	Sarasota, FL 34235
TITLE	PT	21 TITLE	VPD ☒ Change ☐ Addition
NAME	DYMOND, A RONALD	22 NAME	Raymond Donovan
STREET ADDRESS	4941 GREENCROFT RD	23 STREET ADDRESS	4947 Greencroft Rd
CITY-ST-ZIP	SARASOTA, FL 00000 34235	24 CITY-ST-ZIP	Sarasota, FL. 34235
TITLE	D	31 TITLE	Treas ☐ Change ☒ Addition
NAME	DONOVAN, RAYMOND	32 NAME	Jerry McCullough
STREET ADDRESS	4947 GREENCROFT RD	33 STREET ADDRESS	4965 Greencroft Rd.
CITY-ST-ZIP	SARASOTA, FL 00000 34235	34 CITY-ST-ZIP	Sarasota, FL. 34235
TITLE	D	41 TITLE	☐ Change ☐ Addition
NAME	MCCULLOUGH, JERRY	42 NAME	400001510024
STREET ADDRESS	4965 GREENCROFT RD.	43 STREET ADDRESS	-06/09/95--01075--016
CITY-ST-ZIP	SARASOTA FL 34235	44 CITY-ST-ZIP	****130.00 ****130.00
TITLE		51 TITLE	☐ Change ☐ Addition
NAME		52 NAME	
STREET ADDRESS		53 STREET ADDRESS	10 5/1/95 MB
CITY-ST-ZIP		54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	**REMITTED BY MAY 1**
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		64 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)(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.

SIGNATURE: [signature] 4/28/95 813-377-
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone # 8719

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