

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 # **751529** (9)

1. Corporation Name

BAYSHORE ON THE LAKE CONDOMINIUM APARTMENTS, PHASE III, OWNERS ASSOCIATION, INC.



Principal Place of Business

Mailing Address

P.O. BOX 10067
P.O. BOX 10067
BRADENTON FL 34282
US

P.O. BOX 10067
BRADENTON FL 34282-0067
US

3. Date Incorporated or Qualified

03/12/1980

3a. Date of Last Report

02/08/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-2142701

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

**WAGNER PROPERTY MANAGEMENT
4400 EL CONQUISTADOR PKWY
STE 13
BRADENTON FL 34282**

81 Name

HARMONY MANAGEMENT

82 Street Address (P.O. Box Number is Not Acceptable)

4400 EL CONQUISTADOR PKWY.

83

84 City

Bradenton

FL

85 Zip Code

34282

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

2/26/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **PD** ☐ DELETE
NAME **RILEY, THELMA**
STREET ADDRESS **3164 LAKE BAYSHORE DR**
CITY-STATE-ZIP **BRADENTON FL**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-STATE-ZIP

TITLE **C** ☒ DELETE
NAME **OLSON, JAMES**
STREET ADDRESS **3096 LAKE BAYSHORE DR**
CITY-STATE-ZIP **BRADENTON FL**

2.1 TITLE **VP** ☒ Change ☒ Addition
2.2 NAME **PAUL LORANGER**
2.3 STREET ADDRESS **3330 LAKE BAYSHORE DR**
2.4 CITY-STATE-ZIP **BRADENTON, FL**

TITLE **TD** ☒ DELETE
NAME **HAMILTON, AL**
STREET ADDRESS **3442 LAKE BAYSHORE DR**
CITY-STATE-ZIP **BRADENTON FL**

3.1 TITLE **TD** ☒ Change ☐ Addition
3.2 NAME **HAMILTON, AL**
3.3 STREET ADDRESS **3442 LAKE BAYSHORE DR.**
3.4 CITY-STATE-ZIP **BRADENTON, FL**

TITLE **SD** ☒ DELETE
NAME **WILSON, EVELYN**
STREET ADDRESS **3440 LAKE BAYSHORE DR**
CITY-STATE-ZIP **BRADENTON FL**

4.1 TITLE **SD** ☒ Change ☐ Addition
4.2 NAME **VAH, ANTHONY**
4.3 STREET ADDRESS **3360 LAKE BAYSHORE DR**
4.4 CITY-STATE-ZIP **BRADENTON, FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

5.1 TITLE **D** ☐ Change ☒ Addition
5.2 NAME **ANDREWS, MARGA**
5.3 STREET ADDRESS **3344 LAKE BAYSHORE DR**
5.4 CITY-STATE-ZIP **BRADENTON, FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-STATE-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-STATE-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: **Thelma Riley Pres.**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/4/96
Date

941 758-9624
Daytime Phone #

CR2E037 (12/95)