

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 # 722159 (1)
1. Corporation Name

LA COSTA BRAVA CONDOMINIUM NO. 1, INC.

Principal Place of Business

Mailing Address

200001750462
-03/20/96--01014--022
***61.25

2. Principal Place of Business
21 C/O PROGRESSIVE MANAGEMENT

2a. Mailing Address
26 C/O PROGRESSIVE MANAGEMENT

3. Date Incorporated or Qualified
11/24/1971

3a. Date of Last Report

4. FEI Number

591484349

Applied For

Not Applicable

22 Suite, Apt. #, etc.
2753 STATE ROAD 580 #207

27 Suite, Apt. #, etc.
2753 STATE ROAD 580 #207

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

23 City & State
CLEARWATER FL

28 City & State
CLEARWATER FL

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

24 Zip
34621

Country

29 Zip
34621

Country

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

81 Name

MAUREEN C. REARDON, CPM

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

2753 STATE ROAD 580 #207

83

84 City

CLEARWATER

FL

85 Zip Code

34621

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

Maureen C. Reardon

2-5-96

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 ☒ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE P/D ☐ Change ☒ Addition
1.2 NAME DOYLE SR., JAMES J.
1.3 STREET ADDRESS 507 PLAZA SEVILLE CT #13
1.4 CITY-ST-ZIP TREASURE ISLAND FL 33706

TITLE ☒ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE V/D ☐ Change ☒ Addition
2.2 NAME EYNATTEN, ROBERT
2.3 STREET ADDRESS 507 PLAZA SEVILLE CT #16
2.4 CITY-ST-ZIP TREASURE ISLAND FL 33706

TITLE ☒ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE S/D ☐ Change ☒ Addition
3.2 NAME RISSMAN, MIRIAM
3.3 STREET ADDRESS 540 PLAZA SEVILLE CT #76
3.4 CITY-ST-ZIP TREASURE ISLAND FL 33706

TITLE ☒ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE T/D ☐ Change ☒ Addition
4.2 NAME PERKINS, ROBERT
4.3 STREET ADDRESS 509 PLAZA SEVILLE CT #18
4.4 CITY-ST-ZIP TREASURE ISLAND FL 33706

TITLE ☒ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE D ☐ Change ☒ Addition
5.2 NAME WENDEL, KARL
5.3 STREET ADDRESS 505 PLAZA SEVILLE CT #10
5.4 CITY-ST-ZIP TREASURE ISLAND FL 33706

TITLE ☒ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE D ☐ Change ☒ Addition
6.2 NAME STEWART, VIOLET
6.3 STREET ADDRESS 509 PLAZA SEVILLE COURT #20
6.4 CITY-ST-ZIP TREASURE ISLAND FL 33706

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

James J. Doyle Sr Pres

2/9/96

813

3675331

Date

Daytime Phone

CR2E037 (12/95)

DOCUMENT # 722159 (1)

LA COSTA BRAVA CONDOMINIUM NO. 1, INC.

ADDITIONAL OFFICERS AND DIRECTORS:

D
ROBERTS, JOSEPH
501 PLAZA SEVILLE COURT #4
TREASURE ISLAND FL 33706

722159 pg. 2