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NONPROFIT CORPORATION ANNUAL REPORT

1997

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

DOCUMENT # **766766** **(0)**

1. Corporate Name

GREEN DOLPHIN PARK MID-RISE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
552 MAIN ST SAFETY HARBOR FL 34695	552 MAIN ST SAFETY HARBOR FL 34695-3549

3. Date Incorporated or Qualified: **01/31/1983**
3a. Date of Last Report: **01/31/1996**

2. Principal Place of Business
21 | 22 Suite, Apt. #, etc. | 23 City & State | 24 Zip | 25 Country

2a. Mailing Address
26 | 27 Suite, Apt. #, etc. | 28 City & State | 29 Zip | 30 Country

4. FEI Number: **59-2280439** ☐ 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

STEVEN H. MEZER, P.A.
1212 COURT STREET,
STE. B
CLEARWATER FL 34616

10. Name and Address of New Registered Agent

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 (Required: Signature of President or Vice President and Secretary or Assistant Secretary) (NOTE: Registered Agent Signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD NAME LORENZ, JAMES STREET ADDRESS 1734 GOLFVIEW DR CITY-ST-ZIP TARPON SPRINGS FL	☐ DELETE	11 TITLE PD 12 NAME Gerald Clark 13 STREET ADDRESS 1944 Golfview Drive 14 CITY-ST-ZIP Tarpon Springs, FL 34689	☒ Change ☐ Addition
TITLE TD NAME CROSS-KEEFE, DOROTHY STREET ADDRESS 1845 GOLFVIEW DR CITY-ST-ZIP TARPON SPRINGS FL	☐ DELETE	21 TITLE VPD 22 NAME Daniel Stamos 23 STREET ADDRESS 1836 Golfview Drive 24 CITY-ST-ZIP Tarpon Springs, FL 34689	☒ Change ☐ Addition
TITLE D NAME SNYDER, THEODORE STREET ADDRESS 1844 GOLFVIEW DR CITY-ST-ZIP TARPON SPRINGS FL	☐ DELETE	31 TITLE 2VP D 32 NAME Al Robosan 33 STREET ADDRESS 1943 Golfview Drive 34 CITY-ST-ZIP Tarpon Springs, FL 34689	☒ Change ☐ Addition
TITLE D NAME GARLAND, WILLIAM, STREET ADDRESS 1813 GOLFVIEW DRIVE CITY-ST-ZIP TARPON SPRINGS FL	☐ DELETE	41 TITLE TD 42 NAME Dick Reger 43 STREET ADDRESS 1827 Golfview Drive 44 CITY-ST-ZIP Tarpon Springs, FL 34689	☐ Change ☐ Addition
TITLE VD NAME REGER, RICHARD STREET ADDRESS 1827 GOLFVIEW DR CITY-ST-ZIP TARPON SPRINGS FL	☐ DELETE	51 TITLE SD 52 NAME Jerry O'Sullivan 53 STREET ADDRESS 1835 Golfview Drive 54 CITY-ST-ZIP Tarpon Springs, FL 34689	☒ Change ☐ Addition
TITLE SD NAME WITHERS, DONALD STREET ADDRESS 1815 GOLFVIEW DR CITY-ST-ZIP TARPON SPRINGS FL	☐ DELETE	61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY-ST-ZIP	☐ Change ☐ Addition

CR2E037 (9/96)

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 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: Dick Reger Treasurer 3/6/97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone # 0069242