


FILE NOW: FILING FEE IS \$61.25

FILED  
Feb 03 1998 8:00am  
Secretary of State

|   |   |  |
|---|---|--|
| NONPROFIT<br>CORPORATION<br>ANNUAL REPORT<br>1998 |  | FLORIDA DEPARTMENT OF STATE<br>Sandra B. Mortham<br>Secretary of State<br>DIVISION OF CORPORATIONS |
|---|---|--|

DOCUMENT # 753105 (6)  
1. Corporation Name

SCOTSDALE RECREATION ASSOCIATION, INC.

|   |   |
|---|---|
| Principal Place of Business<br>C/O CMC, INC.<br>4175 E BAY DR #205<br>CLEARWATER FL 34624 | Mailing Address<br>C/O CMC, INC.<br>4175 E BAY DR #205<br>CLEARWATER FL 34624 |
|---|---|

3. Date Incorporated or Qualified

06/25/1980

4. FEI Number

59-1702720

Applied For

Not Applicable

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

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. Is this nonprofit corporation a homeowners association?

☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30.

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MARECEK, ADDIE  
375 BERWICK CT  
DUNEDIN FL 34698

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

|                |                      |        |
|----------------|----------------------|--------|
| TITLE          | P                    | DELETE |
| NAME           | BRADLEY, CAROL       |        |
| STREET ADDRESS | 1104 CASTLEMAY COURT |        |
| CITY-ST-ZIP    | DUNEDIN FL 34698     |        |

|                |                   |        |
|----------------|-------------------|--------|
| TITLE          | V                 | DELETE |
| NAME           | MARECEK, ADDIE    |        |
| STREET ADDRESS | 375 BERWICK COURT |        |
| CITY-ST-ZIP    | DUNEDIN FL 34698  |        |

|                |                     |        |
|----------------|---------------------|--------|
| TITLE          | S                   | DELETE |
| NAME           | TOMLIANOVICH, AGNES |        |
| STREET ADDRESS | 1109 TARRIDON CT.   |        |
| CITY-ST-ZIP    | DUNEDIN FL 34698    |        |

|                |                  |        |
|----------------|------------------|--------|
| TITLE          | D                | DELETE |
| NAME           | CRAMER, CARL     |        |
| STREET ADDRESS | 1196 MONTROSE PL |        |
| CITY-ST-ZIP    | DUNEDIN FL 34698 |        |

|                |                    |        |
|----------------|--------------------|--------|
| TITLE          | D                  | DELETE |
| NAME           | PARISI, SAM        |        |
| STREET ADDRESS | 495 EXMOOR TERRACE |        |
| CITY-ST-ZIP    | DUNEDIN FL 34698   |        |

|                |                     |        |
|----------------|---------------------|--------|
| TITLE          | T                   | DELETE |
| NAME           | RUTTER, WILLIAM     |        |
| STREET ADDRESS | 1331 ISLE OF SKY CT |        |
| CITY-ST-ZIP    | DUNEDIN FL          |        |

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

|                    |                   |        |          |
|--------------------|-------------------|--------|----------|
| 1.1 TITLE          | P                 | Change | Addition |
| 1.2 NAME           | Addie Marecek     |        |          |
| 1.3 STREET ADDRESS | 875 Berwick Ct    |        |          |
| 1.4 CITY-ST-ZIP    | Dunedin, FL 34698 |        |          |

|                    |                   |        |          |
|--------------------|-------------------|--------|----------|
| 2.1 TITLE          | VP                | Change | Addition |
| 2.2 NAME           | CAROL BRADLEY     |        |          |
| 2.3 STREET ADDRESS | 1104 CASTLE MAY   |        |          |
| 2.4 CITY-ST-ZIP    | Dunedin, FL 34698 |        |          |

|                    |                   |        |          |
|--------------------|-------------------|--------|----------|
| 3.1 TITLE          | S.                | Change | Addition |
| 3.2 NAME           | Delores Noonan    |        |          |
| 3.3 STREET ADDRESS | 483 Exmoor Terr.  |        |          |
| 3.4 CITY-ST-ZIP    | Dunedin, FL 34698 |        |          |

|                    |                   |        |          |
|--------------------|-------------------|--------|----------|
| 4.1 TITLE          | T.                | Change | Addition |
| 4.2 NAME           | Bill Rutter       |        |          |
| 4.3 STREET ADDRESS | 1331 Isle of Sky  |        |          |
| 4.4 CITY-ST-ZIP    | Dunedin, FL 34698 |        |          |

|                    |                      |        |          |
|--------------------|----------------------|--------|----------|
| 5.1 TITLE          | D.                   | Change | Addition |
| 5.2 NAME           | Col. Robert Crawford |        |          |
| 5.3 STREET ADDRESS | 1253 Sutherland      |        |          |
| 5.4 CITY-ST-ZIP    | Dunedin, FL 34698    |        |          |

|                    |                   |        |          |
|--------------------|-------------------|--------|----------|
| 6.1 TITLE          | D.                | Change | Addition |
| 6.2 NAME           | MARY Herrell      |        |          |
| 6.3 STREET ADDRESS | 364 Perth Ct      |        |          |
| 6.4 CITY-ST-ZIP    | Dunedin, FL 34698 |        |          |

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(f), 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: Addie Marecek 1-7-98 736-6014

CR2E037 (10/97)