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NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N18058

1. Corporation Name

CAPTAIN'S WAY AT ADMIRAL'S COVE CONDOMINIUM ASSO
CIATION, INC.

Principal Place of Business

200 ADMIRALS COVE BLVD.
JUPITER FL 33477

Mailing Address

200 ADMIRALS COVE BLVD.
JUPITER FL 33477



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

12/03/1986

4. FEI Number

59-2845005

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

ADMIRAL'S COVE MGMT. CO.
200 ADMIRALS COVE BLVD.
JUPITER FL 33477

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

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 ☐ DELETE

NAME ~~SD~~
MCCAFFERTY, ROBERT
STREET ADDRESS 801 CAPTAINS WAY
CITY-ST-ZIP JUPITER FL 33477

TITLE ☒ DELETE

NAME PD
NORDIN, ROBERT F
STREET ADDRESS 904 CAPTAINS WAY
CITY-ST-ZIP JUPITER FL

TITLE ☒ DELETE

NAME VPD
LEGNOS, JOHN
STREET ADDRESS 3202 CAPTAINS WAY
CITY-ST-ZIP JUPITER FL

TITLE ☐ DELETE

NAME ATD
SUTON, RITA
STREET ADDRESS 3401 CAPTAINS WAY
CITY-ST-ZIP JUPITER FL

TITLE ☐ DELETE

NAME TD
WASSERMAN, EDWARD
STREET ADDRESS 804 CAPTAINS WAY
CITY-ST-ZIP JUPITER FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME TD

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☒ Addition

2.2 NAME VPD

2.3 STREET ADDRESS George Isenberg

2.4 CITY-ST-ZIP 1502 CAPTAINS WAY

3.1 TITLE ☒ Change ☒ Addition

3.2 NAME PD

3.3 STREET ADDRESS DR. Thomas Powers

3.4 CITY-ST-ZIP 4002 CAPTAINS WAY

4.1 TITLE ☒ Change ☐ Addition

4.2 NAME SD

4.3 STREET ADDRESS Sutow Rita

4.4 CITY-ST-ZIP 33477

5.1 TITLE ☒ Change ☐ Addition

5.2 NAME ATD

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP 33477

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I 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 with all other like empowered.

SIGNATURE: *Edward Wasserman*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

4/28/99 (561) 744-1700 Ext. 2524

CR2E037 (11/98)