FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Jan 29 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

700165

(4)

BIRD KEY IMPROVEMENT ASSOCIATION INC

Principal Place of Business Mailing Address						16611E 1881! 881! 88181 1818 E191 Bill	0 011 6 6 0 6 0 11	BEBUT BURTH BRBU
100 BIRD KEY DRIVE		100 BIRD KEY DRIVE			3. Date Incorporated or Qualified			
SARASOTA FL 34236		SARASOTA FL 34236			11/18/1959			
						4. FEI Number	— — — — — — — — — — — — — — — — — — —	Applied For
2 Principal P	ace of Business	2a. Mailing Address			59-0952687	00.75	Not Applicable	
21		26				5. Certificate of Status Desired		Additional Required
Suite, Apt. #, etc.		Suite, Apt. #, etc.			•	6. Election Campaign Financing		May Be
22		27				Trust Fund Contribution		to Fees
City & State		City & State				7. Is this nonprofit corporation a homeowners association?		
Zip Country		28 Zin	Zip Country			8. This corporation owes or has paid the current year Intangible		
24 25		29 30			Personal Property Tax due June 30. Yes No			
9. Name and Address of Current Registered Agent						10. Name and Address of New Regis		
			81	Name	3			
S. SANFORD SCHLITT			82	Street	t Addres	ss (P.O. Box Number is Not Acceptable))	
	D KEY DRIVE		83			· · · · · · · · · · · · · · · · · · ·		
SARASOTA FL 34236			83					
			84	City			FL 85 Zip	Code
11. Pursuant i	to the provisions of Sections 617.050	2 and 617.1508, Florida Statutes	, the above	e-named	d corpor	ration submits this statement for the pur		its registered
office or re	egistered agent, or both, in the State m familiar with, and accept the oblig	of Florida, Such change was au ations of, Section 617,0503, Flori	thorized by da Statutes	the co	rporatio	ration submits this statement for the pur n's board of directors. I hereby accept t	the appointment a	s registered
SIGNATURE _	and accept the cong			-				
	Signature, typed or printed name of registered ag-			nt signatur	re required		DATE	
12.		DELETE DELETE	13.		1	ADDITIONS/CHANGES TO OFFICER	RS AND DIRECTO Change	
TITLE	TD CLADE	☐ OFFEIE	1.1 TITLE 1.2 NAME				Crange	Acciden
NAME STREET ADDRESS	KILAR, CLARE 100 BIRD KEY DRIVE		1.2 NAME 1.3 STREET	ADDDCCC				
	SARASOTA FL		.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		-			
CITY-ST-ZIP TITLE	VD	DELETE	1.4 CITY - S 2.1 TITLE	1-ZP			Change	Addition
NAME	LUDWIG, GERALDINE	2.25						/ideltion
STREET ADDRESS	100 BIRD KEY DRIVE			2.3 STREET ADDRESS				
	SARASOTA FL		2.4 CITY-5					
CITY-ST-ZIP	PD	DELETE 3.1 Y		51- LIF	+		☐ Change	Addition
NAME	SCHLITT, SANFROD S.	32.0					•	_
STREET ADDRESS	100 BIRD KEY DRIVE		3.3 STREET	ADDDESS				
	SARASOTA FL		3.4. CITY-S					
CITY-ST-ZIP TITLE	SD	DELETE	4.1 TITLE	11-ZIF	1		Change	Addition
NAME	KILAR, CLARE		4, 2 NAME		1			
STREET ADDRESS	100 BIRD KEY DRIVE		4.3 STREET	ADDRESS	Ī			
CITY-ST-ZIP	SARASOTA FL		4.4 CITY-S		1			
TITLE	CALAGOTATE	☐ DELETE	5.1 TITLE	1-24	 		Change	Addition
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREET	ADDRESS	-			
CITY-ST-ZIP	I		5.4 C/TY - S		1			
TITLE			6.1 TITLE) - TIL	1		Change	☐ Addition
NAME			6.2 NAME		1			
STREET ADDRESS			6.3 STREET	ADDRESS.				
OTHER MUNICIPAL			S ON STITLE		1			

14. Thereby 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.