

FILE NOW: FILING FEE IS \$61.25

FILED

Apr 09 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 715709 (2) 1. Corporation Name BOCA CIEGA POINT EAST "ONE" CONDOMINIUM, INC.			
Principal Place of Business NC. 275 BOCA CIEGA POINT BLVD. ST. PETERSBURG FL 33708		Mailing Address NC. 275 BOCA CIEGA POINT BLVD. ST. PETERSBURG FL 33708-2756	
2. Principal Place of Business 21 Sulte, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Sulte, Apt. #, etc. 27 City & State 28 Zip 29 Country	
3. Date Incorporated or Qualified 12/12/1968		3a. Date of Last Report 05/01/1996	
4. FEI Number 59-1561870		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 FEDERATION OF BOCA CIEGA PT CONDO, INC. 275 BOCA CIEGA POINT BLVD ST. PETERSBURG FL 33708		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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____			
12. OFFICERS AND DIRECTORS ☐ DELETE			
TITLE	PD	☐ DELETE	
NAME	WILKE, JACK		
STREET ADDRESS	1 BOCA CIEGA PT BLVD 307		
CITY-ST-ZIP	ST PETERSBURG, FL 00000		
TITLE	VP	☒ DELETE	
NAME	DIEKHAUS, CHRISTINE		
STREET ADDRESS	1 BOCA CIEGA PT. BLVD. 115		
CITY-ST-ZIP	ST PETERSBURG, FL 00000		
TITLE	SD	☐ DELETE	
NAME	MARY MORRIS		
STREET ADDRESS	275 BOCA CIEGA PT BLVD.		
CITY-ST-ZIP	ST PETERSBURG, FL 00000		
TITLE	TD	☐ DELETE	
NAME	JOHN ENRIGHT		
STREET ADDRESS	275 BOCA CIEGA PT. BLVD.		
CITY-ST-ZIP	ST. PETERSBURG FL		
TITLE	D	☐ DELETE	
NAME	KALISH, Doris		
STREET ADDRESS	275 Boca Ciega Pt Blvd		
CITY-ST-ZIP	St Petersburg, FL. 33708		
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			
1.3 STREET ADDRESS			
1.4 CITY-ST-ZIP			
2.1 TITLE	☐ Change ☒ Addition		
2.2 NAME	Treasurer		
2.3 STREET ADDRESS	YOKEL, Beverly		
2.4 CITY-ST-ZIP	1 Boca Ciega Pt Blvd. 101 St. Petersburg, Fl 33708		
3.1 TITLE	☐ Change ☐ Addition		
3.2 NAME			
3.3 STREET ADDRESS			
3.4 CITY-ST-ZIP			
4.1 TITLE	☒ Change ☐ Addition		
4.2 NAME	VPD		
4.3 STREET ADDRESS	John Enright		
4.4 CITY-ST-ZIP	275 Boca Ciega Pt Blvd St. Petersburg, Fl. 33708		
5.1 TITLE	☐ Change ☐ Addition		
5.2 NAME			
5.3 STREET ADDRESS			
5.4 CITY-ST-ZIP			
6.1 TITLE	☐ Change ☐ Addition		
6.2 NAME			
6.3 STREET ADDRESS			
6.4 CITY-ST-ZIP			

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)(j), 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 _____ DATE **3/20/97** **813 398-1171**