

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 716303 (3)
1. Corporation Name
SOUTH SEA ISLANDER, INC. A CONDOMINIUM



Principal Place of Business Mailing Address
231 E LANTANA RD 231 E LANTANA RD
LANTANA FL 33462 LANTANA FL 33462

3. Date Incorporated or Qualified 04/02/1969 3a. Date of Last Report 04/12/1995
4. FEI Number 59-1237357 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

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Zip
24 Country 29 Country
25 Country 30 Country

9. Name and Address of Current Registered Agent

ASSOCIATION TRANSITION INC.
346 S.E. 5TH AVENUE
DELRAY BEACH FL 33482

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 617.0509 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 re-stating)

DATE

4/30/96

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE
NAME BURNS, JAMES H.
STREET ADDRESS 231 E. LANTANA RD., #602
CITY-ST-ZIP LANTANA FL
TITLE VD ☐ DELETE
NAME TRIPP, ANTHONY R
STREET ADDRESS 231 E LANTANA RD
CITY-ST-ZIP LANTANA FL
TITLE D ☐ DELETE
NAME CRUIKSHANK, JOHN
STREET ADDRESS 231 E. LANTANA RD. #205
CITY-ST-ZIP LANTANA FL
TITLE TD ☐ DELETE
NAME KENNEDY, MARION
STREET ADDRESS 231 E LANTANA RD
CITY-ST-ZIP LANTANA FL
TITLE D ☐ DELETE
NAME VAHALA, TIMO
STREET ADDRESS 231 E LANTANA RD
CITY-ST-ZIP LANTANA FL
TITLE D ☐ DELETE
NAME MASTERSON, FRANK
STREET ADDRESS 231 E LANTANA RD
CITY-ST-ZIP LANTANA FL

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 Director ☐ Change ☐ Addition
2.2 NAME XXXX
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
3.1 TITLE Vice President ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
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

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

MARION J. KENNEDY

4-30-96

CR2E037 (12/95)