1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## **DOCUMENT # 716303**

1. Corporation Name

## SOUTH SEA ISLANDER, INC. A CONDOMINIUM

Pnn	cipai	Place	OI BUS
231	E LA	NTAN	A RD
LAN	TANA	FL 3	3462

2. Principal Place of Business

Suite, Apt. #, etc.

Mailing Address

5710 S DIXIE HWY #A W.P.B. FL 33405 US

2a. Mailing Address

Suite, Apt. #, etc.

26

## FILED Apr 12, 1999 8:00 am § Secretary of State

04-12-1999 90012 039 \*\*\*\*61.25

f JESIEN iller ifner biler jinie inrat bire imm 1 5 1 9 5 315195 - 90012 - 39



3. Date Incorporated or Qualifed

04/02/1969

4. FEI Number

22	January Communication of the C	27	٠	• • •				59-1237357	*** * * * * * * * * * * * * * * * * * *	Not	Applicable	
City & State City & State						5. Certificate of Status Desired		\$8.75 A				
23	28						5. Certificate of Clauda Desired		Fee Rec	uired		
Zip	Country	Zip Cou		Cour	ountry			6. Election Campaign Financing		\$5.00 h	May Be	
24	25	29	9 30					Trust Fund Contribution		Added to	Fees	
9. Name and Address of Current Registered Agent								10. Name and Address of New F	Registered	Agent		
					81	Name						
TOUCHSTONE WEBB MGMNT					82	Street A	Address	(P.O. Box Number is Not Accepta	able)	•	·	
SALATA, KATHLEEN WEBB						••						
5710 S DIXIE HWY STE A					83						Ì	
WPB FL 33405					84	City				85 Zip C	ode	
WFD FL 33403					•	City			FL	.   00   2.5 0	***	
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 octange was authorized by the corporation's load or directors. I net easy accept the obligations of Section 617 0503. Florida Statutes.												
7-1-99												
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)										20.41.40		
12.	- OFFICERS AND	DIREC	<u> </u>	13.				ADDITIONS/CHANGES TO OF				
TITLE	PD		DELETE	1.1 1111	LE ]	PD	Jud	ith Cromie		Change	☐ Addition	
NAME	BURNS, JAMES H.		•	1.2 NA	ME	ĺ	231	E. Lantana Roa	d, Ur	it 601		
STREET ADDRESS	TADDRESS 231 E. LANTANA RD., #602			1.3 STF				tana, Fl. 33462		•		
CITY-ST-ZIP	LANTANA FL				Y-ST-				,	<u> </u>		
TITLE	D		☐ DELETE	2.1 1111	LE ,	VPD	Pen	tti Siren		Change	Addition	
NAME	SIREN, PENTTI			2.2 NA	ME			E. Lantana Roa	d, Ur	it 504		
STREET ADDRESS	1		2.3 STF				tana, Fl. 33462			{		
CITY-ST-ZIP	LANTANA FL		و ه د دی مصنب	2.4 CI		-ZIP						
TITLE	SAT		☐ DELETE	3.1 TITI	Œ (	SD	Agn	es_Fonti		Change	Addition	
NAME	CROMIE, JUDITH			3.2 NA	WE	• 1	231	E. Lantana Roa	d, Ur	nit 703	}	
STREET ADDRESS	STREET ADDRESS 231 E LANTANA RD #601		3.3 STF	3.3 STREET ADORESS I		Lan	tana, Fl. 33462	<u>!</u>				
CITY-ST-ZIP	LANTANA FL			3.4. CIT				<u> </u>				
TITLE	TD		☐ DELETE	4.1 TIT	LE ,	$_{ m TD}$ $\mid$	Mar	ion Kennedy		Change	Addition	
NAME	KENNEDY, MARION			4. 2 NA	ME			E. Lantana Roa	d. Ur	nit 501	<u> </u>	
STREET ADDRESS	231 E LANTANA RD .			4.3 STF	REET	ADDRESS		tana, Fl. 33462		•	'	
CITY-ST-ZIP	LANTANA FL			4.4 CIT	Y-ST-	-ZIP			-			
TITLE	D		DELETE	5.1 TIT	Œ,	77DN	Cli	fford Weller		Change	Addition	
NAME	MASTERSON, FRANK		·	•				E. Lantana Roa	d. IIr	it 509	; '	
STREET ADDRESS	231 E LANTANA RD					ADDRESS		tana, Fl. 33462		116 504	<b>^</b>	
CITY-ST-ZIP	LANTANA FL			5.4 CIT		- ZIP	man	Lana, FI. 33402	• •		· · · · · · · · · · · · · · · · · · ·	
TITLE C	٠.		☐ DELETE	6.1 TTT				•		Change	Addition	
NAME				6.2 NA				<b>y</b>				
STREET ADDRESS				6.3 STI	REET	ADDRESS		• }				
CITY-ST-ZIP	· .			6.4 CFT			L.,					
777	100 at a at 2 0 at 1 a a a 15 and a 264	46.1 - 611		ha avar			2:50	tion 110 07/3\(ii) Florida Statutes	I further co	rtifi: that the in	formation	

nereby 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:

Applied For