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Apr 15 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 # **719193** **(5)**

1. Corporation Name

INNISBROOK CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
US HIGHWAY 19 SOUTH P. O. BOX 397 TARPON SPRINGS 34688-0397	US HIGHWAY 19 SOUTH P. O. BOX 397 TARPON SPRINGS 34688-0397

3. Date Incorporated or Qualified: 06/26/1970
3a. Date of Last Report: 03/25/1996

2. Principal Place of Business	2a. Mailing Address
21 36750 US Hwy 19 North	26 36750 US Hwy 19 North
Suite, Apt. #, etc. 22 P. O. Box 397	Suite, Apt. #, etc. 27 P. O. Box 397
City & State 23 Tarpon Springs, FL	City & State 28 Tarpon Springs, FL
Zip / Country 24 34688-0397 25 USA	Zip / Country 29 34688-0397 30 USA

4. FEI Number: 59-1744626 ☐ 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

KERN, ROBERT G
3834 TARPON POINTE CIRCLE
PALM HARBOR FL 34684

10. Name and Address of New Registered Agent

81 Name: Bergen, Leonard H
82 Street Address (P.O. Box Number is Not Acceptable): Innisbrook, Lodge 26, Apt. 3438
83 ~~P.O. Box 1088~~
84 City: Tarpon Springs **FL** 85 Zip Code: 34688

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: Leonard H. Bergen, President — 4/7/97
(Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	TD	☒ DELETE	1.1 TITLE	PD	☒ Change ☐ Addition
NAME	BERGEN, LEONARD H		1.2 NAME	Bergen, Leonard H	
STREET ADDRESS	INNISBROOK, LODGE 26, APT. 3438		1.3 STREET ADDRESS	Innisbrook, Lodge 26, Apt. 3438	
CITY-ST-ZIP	TARPON SPRINGS FL 34688		1.4 CITY-ST-ZIP	Tarpon Springs FL 34688	
TITLE	PD	☒ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	KERN, ROBERT G		2.2 NAME		
STREET ADDRESS	3834 TARPON POINTE CIRCLE		2.3 STREET ADDRESS		
CITY-ST-ZIP	PALM HARBOR FL 34684		2.4 CITY-ST-ZIP		
TITLE	VD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	MAG, GENE		3.2 NAME		
STREET ADDRESS	304 OLD MILL POND RD.		3.3 STREET ADDRESS		
CITY-ST-ZIP	PALM HARBOR FL 34683		3.4 CITY-ST-ZIP		
TITLE	SD	☒ DELETE	4.1 TITLE	800002146850	☐ Change ☐ Addition
NAME	MADER, DAVE		4.2 NAME	-04/17/97--01101--018	
STREET ADDRESS	406 MARINER DR		4.3 STREET ADDRESS	***61.25	
CITY-ST-ZIP	TARPON SPRINGS FL		4.4 CITY-ST-ZIP		
TITLE		☐ DELETE	5.1 TITLE	SD	☐ Change ☒ Addition
NAME			5.2 NAME	Erickson, Warren	
STREET ADDRESS			5.3 STREET ADDRESS	2174 Oak Forest Lane	
CITY-ST-ZIP			5.4 CITY-ST-ZIP	Palm Harbor FL 34683	
TITLE		☐ DELETE	6.1 TITLE	TD	☐ Change ☒ Addition
NAME			6.2 NAME	Morris, Gilbert	
STREET ADDRESS			6.3 STREET ADDRESS	Innisbrook, Lodge 26, Apt. 3434	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	Tarpon Springs FL 34688	

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)(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.

SIGNATURE: Leonard H. Bergen — 4/7/97 — (813)942-5260
(SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR) Date Daytime Phone # 0088884