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Apr 01 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONSDOCUMENT # 721097 (4)
1. Corporation Name

BONEFISH TOWERS CONDOMINIUM, INC.

Principal Place of Business
2000 COCO PLUM DRIVE
MARATHON FL 33050
Mailing Address
2000 COCO PLUM DRIVE
MARATHON FL 33050-40643. Date Incorporated or Qualified
06/07/1971
3a. Date of Last Report
03/12/1996

2. Principal Place of Business 21	2a. Mailing Address 26	4. FEI Number 59-1641175	Applied For Not Applicable
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
City & State 23	City & State 28	6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
Zip 24	Country 25	7. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No	
		29	30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BECKER & POLIAKOFF P.A.
6161 BLUE LAGOON DR.
STE. 250
MIAMI FL 33126

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 _____ DATE _____
(Signature, typed or printed name of registered agent, and title if applicable) (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P ☐ DELETE	1.1 TITLE	D ☐ Change ☒ Addition
NAME	SCELZO, JOSEPH F	1.2 NAME	Key, William
STREET ADDRESS	2000 COCO PLUM DR, #603	1.3 STREET ADDRESS	31 W. Parish Road
CITY-ST-ZIP	MARATHON FL	1.4 CITY-ST-ZIP	Concord, NH 03303
TITLE	ST ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	BLEIDNER, JAMES	2.2 NAME	
STREET ADDRESS	2000 COCO PLUM DR., #706	2.3 STREET ADDRESS	
CITY-ST-ZIP	MARATHON FL	2.4 CITY-ST-ZIP	
TITLE	D ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	SANT, JOHN	3.2 NAME	
STREET ADDRESS	115 VALHALLA DR	3.3 STREET ADDRESS	
CITY-ST-ZIP	NEW CASTLE PA	3.4 CITY-ST-ZIP	
TITLE	D ☐ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	ATWOOD, WILLIAM	4.2 NAME	
STREET ADDRESS	2000 COCO PLUM DR., #804	4.3 STREET ADDRESS	
CITY-ST-ZIP	MARATHON FL	4.4 CITY-ST-ZIP	
TITLE	D ☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	BARNES, RICHARD	5.2 NAME	
STREET ADDRESS	5450 ALLISONVILLE RD.	5.3 STREET ADDRESS	
CITY-ST-ZIP	INDIANAPOLIS IN	5.4 CITY-ST-ZIP	
TITLE	VP ☐ DELETE	6.1 TITLE	☐ Change ☐ Addition
NAME	BOGAN, MARY K	6.2 NAME	
STREET ADDRESS	15641 ROBIN LN.	6.3 STREET ADDRESS	
CITY-ST-ZIP	MISHAWAKA IN	6.4 CITY-ST-ZIP	

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: Jameson Bleidner
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTORMARCH 4, 1997 305-289-0488
Date Daytime Phone 0024832

CP2E037 (9/96)