## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1998

FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 724396 (7)						
SAN CRISTOBAL ASSOCIATION, INC.						
2,						)
Principal Place	e of Rusiness	Mailing Address			{   10074   10010     11080   1110     1011   1011   1011   1011   1011   1011   1011   1011   1011   10	
616 FLAMINGO VENICE FL 342		616 FLAMINGO DRIVE VENICE FL 34285			3. Date Incorporated or Qualified	l
12.002 12 11	•••	15/11/05 1 5 9/1500			09/21/1972 4. FEI Number Applied For	
					14551104 145	_
2. Principal Place of Business 2e, Mailing Addres					C 75 1400	↤
21		26			5. Certificate of Status Desired	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			6. Election Campaign Financing \$5.00 May Be	
22	···	27			Trust Fund Contribution Added to Fees	
City & State	8	City & State			7. Is this nonprofit corporation a homeowners association?	
Zip	Country	28	Count	try	8. This corporation owes or has paid the current year Intangible	$\dashv$
24	25	29	30	.,	Personal Property Tax due June 30. Yes No	
	9. Name and Address of Curre				10. Name and Address of New Registered Agent	
<u> </u>			8	1 Name	10	
FUSILLO	), DANIEL		l e	2 Street	et Address (P.O. Box Number is Not Acceptable)	$\dashv$
616 FLA	MINGO DR #202		Ľ			
VENICE	FL 34285		8	3		
			8	4 City	85 Zip Code	$\dashv$
44 5	40-41-04705	00 047 4500 51	4		FL   Se Zip Coole	
office or re	to the provisions of Sections 617.05 egistered agent, or both, in the Stat	e of Florida. Such change wa	utes, the abo s authorized i	ive-named by the cor	ed corporation submite this statement for the purpose of changing its register orporation's board of directors. I hereby accept the appointment as registered	d l
agent. I a	m familiar with, and accept the obliq	gations of, Section 617.0503,	Florida Statut	<b>9</b> S.		
SIGNATURE _	Signature, typed or printed name of registered as	peni and title if applicable. (N	OTE: Registered A	gent signature	ure required when reinstating) DATE	-
12.	OFFICERS AF	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D			i .	Additional	ilon
NAME	MOOREHEAD, HENRY		12 NAME		I'MI EREDI CAN'ES	- }
STREET ADDRESS	616 FLAMINGO DR		1.3 STRE	ET ADDRESS		
CITY-ST-ZIP	VENICE, FL 00000	I DELETE	1.4 CITY - ST - ZIP		VENICE, FL. 34285   Change   Addi	
TITLE	TD DANNEL	☐ DELETE	2.1 TITLE		Li Change Li Adoli	ion
NAME	FUSILLO, DANIEL 616 FLAMINGO DR		2.2 NAM	=		
STREET ADDRESS	VENICE, FL 00000		- I	ET ADDRESS	8	
CITY-ST-ZIP TITLE	PD PD	DELÉTE	2. 4 CITY 3.1 TITLE		☐ Change ☐ Addit	ion
NAME	OLDFORD, WILLIAM		3.2 NAM		Live County	
STREET ADDRESS	616 FLAMINGO DR			ET ADDRESS	s	
CITY-ST-ZIP	VENICE, FL 00000		3.4. CITY			ļ
TITLE	<b>S</b> D	☐ DELETE	4.1 TITLE		☐ Change ☐ Addit	ion
NAME	Cretsinger, Frank		4. 2 NAM	E		ŀ
STREET ADDRESS	616 FLAMINGO DR		4.3 STRE	ET ADDRESS	s !	İ
CITY-ST-ZIP	VENICE, FL 00000		4.4 CITY			
TITLE	D D	DELETE	5.1 TITLE		☐ Change ☐ Addil	ION
NAME	SMITH, HARRY		5.2 NAM			
STREET ADDRESS	616 FLAMINGO DR.		•	et address	§	- }
CITY-ST-ZIP	VENICE FL	☐ DELETE	5.4 CfTY -		☐ Change ☐ Addit	ioc
TITLE NAME		□ DETCIE	6.1 TITLE 6.2 NAMI		Change C Addit	IUII
STREET ADDRESS				ET ADDRESS		
CITY OF THE				ET ZID		ļ

I 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.

CIONATUDE.

lateral Chamber

2-1-98 (941)485.1092

**FILED** 

Mar 09 1998 8:00am

Secretary of State

R2E037 (10/97)