FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAY -1 AM 9:14

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 725606 (8)

1. Corporation Name

SEA PINES CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
6925-6951 GULF OF MEXICO DR. LONGBOAT KEY FL 34228 US	5500 MARINA DR SUITE ONE HOLMES BEACH FL 34217 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 02/20/1973
3a. Date of Last Report: 04/08/1994
4. FEI Number: 59-1482572 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ $68.75 Supplemental Fee Not Required
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	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

SOKOL, C. ROBERT
6951 GULF OF MEXICO DR
SARSOTA FL 33577

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 607.0502 and 607.1508, 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 607.0505, 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	SD	1.1 TITLE	D/VP ☒ Change ☐ Addition
NAME	SOKOL, ROBERT	1.2 NAME	Sokol, Robert
STREET ADDRESS	6951 GULF OF MEXICO DR.	1.3 STREET ADDRESS	6951 Gulf of Mexico Dr
CITY-ST-ZIP	LONGBOAT KEY FL	1.4 CITY-ST-ZIP	Longboat Key, FL 34228
TITLE	D	2.1 TITLE	D ☒ Change ☐ Addition
NAME	ECKEL, DAVID	2.2 NAME	Longino, Elaine
STREET ADDRESS	490 TONAWANDA CR RD.	2.3 STREET ADDRESS	1500 NW 16th Ave #248
CITY-ST-ZIP	NORTH TONOWANDA NY	2.4 CITY-ST-ZIP	Gainsville, FL 32605
TITLE	DVP	3.1 TITLE	S/T/D ☒ Change ☐ Addition
NAME	BEYER, NORMAN	3.2 NAME	Estrin, Alison
STREET ADDRESS	1212 BEAVER DAM RD.	3.3 STREET ADDRESS	~~P. O. Box 148~~ NA 6945 Gulf Mexico
CITY-ST-ZIP	POINT PLEASANE NJ	3.4 CITY-ST-ZIP	~~Ellenton, FL 34222~~ Longboat Key
TITLE	P	4.1 TITLE	☐ Change ☐ Addition
NAME	CARROLL, TIMOTHY	4.2 NAME	100001531381
STREET ADDRESS	16724 EDGEWATER DR	4.3 STREET ADDRESS	-07/06/95--01096--005
CITY-ST-ZIP	LAKEWOOD OH	4.4 CITY-ST-ZIP	~~*****130.00~~ ~~*****130.00~~ ☐ Change ☐ Addition
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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)(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: Allison Estrin Allison B. Estrin 4/26/95 813/776-2280
SIGNATURE AND TYPED OR PRINTED NAME OF INCORPORATOR OR OFFICER OR DIRECTOR — Date — Daytime Phone #

0017978