

FILE NOW: FILING FEE IS \$61.25

FILED

Jun 18 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 725927 (8)

1. Corporation Name

TREASURE ISLAND TENNIS & YACHT CLUB CONDOMINIUM #1, INC.

Principal Place of Business

Mailing Address

10033 9TH ST. N. 2ND FLOOR
ST. PETERSBURG FL 33716

10033 9TH ST. N. 2ND FLOOR
ST. PETERSBURG FL 33716-3804



2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 25 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 03/27/1973	3a. Date of Last Report 04/15/1996
4. FEI Number 59-1564619		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

10. Name and Address of New Registered Agent

RAMPART PROPERTIES, INC
10033 NINTH ST N.
2ND FLOOR
ST. PETERSBURG FL 33716

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

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	D ☒ DELETE	1.1 TITLE	D ☒ Change ☐ Addition
NAME	GRABER, JOSEPH	1.2 NAME	Graber, Joseph
STREET ADDRESS	450 TREASURE ISL CSWY #412	1.3 STREET ADDRESS	10033 9th Street North
CITY-ST-ZIP	TREASURE ISL, FL 00000	1.4 CITY-ST-ZIP	St. Petersburg, FL
TITLE	P ☒ DELETE	2.1 TITLE	P/P ☒ Change ☐ Addition
NAME	SONTAG, ROBERT	2.2 NAME	Sontag, Robert
STREET ADDRESS	450 TREASURE ISL CSWY #702	2.3 STREET ADDRESS	10033 9th Street North
CITY-ST-ZIP	TREASURE ISL, FL 00000	2.4 CITY-ST-ZIP	St. Petersburg, FL
TITLE	SD ☒ DELETE	3.1 TITLE	S/P ☒ Change ☐ Addition
NAME	CASEBOLT, WILMA	3.2 NAME	Casebolt, Wilma
STREET ADDRESS	450 TREASURE ISLAND CAUSEWAY #604	3.3 STREET ADDRESS	10033 9th Street North
CITY-ST-ZIP	TREASURE ISLAND FL 33706	3.4 CITY-ST-ZIP	St. Petersburg, FL
TITLE	V ☒ DELETE	4.1 TITLE	VP/P ☒ Change ☐ Addition
NAME	SAMUEL, BARBARA	4.2 NAME	Samuel, Barbara
STREET ADDRESS	450 TREASURE ISL CSWY #107	4.3 STREET ADDRESS	10033 9th Street North
CITY-ST-ZIP	TREASURE ISLAND FL	4.4 CITY-ST-ZIP	St. Petersburg, FL
TITLE	T ☒ DELETE	5.1 TITLE	T/O ☒ Change ☐ Addition
NAME	WRAY, DONALD	5.2 NAME	Wray, Donald
STREET ADDRESS	450 TREASURE ISLAND CAUSEWAY, #207	5.3 STREET ADDRESS	10033 9th Street North
CITY-ST-ZIP	TREASURE ISLAND FL	5.4 CITY-ST-ZIP	St. Petersburg, FL
TITLE	☒ DELETE	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 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: *[Signature]*

4/24/97 (813) 360-0698

CP2E037 (9/96)