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NONPROFIT
 CORPORATION
 ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # 725984

1. Corporation Name

MAI KAI CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

1935 S CONWAY RD
 ORLANDO FL 32812
 US

Mailing Address

1935 S. CONWAY RD.
 ORLANDO FL 32812
 US



2. Principal Place of Business

21 1935 S CONWAY RD

Suite, Apt. #, etc.

22 City & State

23 ORLANDO, FLORIDA

Zip Country

24 32812

25 USA

2a. Mailing Address

26 SAME

Suite, Apt. #, etc.

27 City & State

28

Zip Country

29

30

3. Date Incorporated or Qualified:

04/03/1973

4. FEI Number

59-1579078

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

9. Name and Address of Current Registered Agent

GERTENBACH, JEAN A
 1935 S CONWAY RD
 SUITE E-6
 ORLANDO FL 32812

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 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

TITLE **D** DELETE
 NAME GERTENBACH, JEAN
 STREET ADDRESS 1935 S. CONWAY RD., E-6
 CITY-ST-ZIP ORLANDO FL

TITLE **VPD** DELETE
 NAME NESMITH, DOROTHY E
 STREET ADDRESS 1935 S CONWAY RD, I-2
 CITY-ST-ZIP ORLANDO FL 32812

TITLE **TD** DELETE
 NAME SPERLING, JOHN G
 STREET ADDRESS 1935 S CONWAY RD, H-5
 CITY-ST-ZIP ORLANDO FL 32812

TITLE **SD** DELETE
 NAME SHARP, WILLIAM B
 STREET ADDRESS 1935 S CONWAY RD, S-6
 CITY-ST-ZIP ORLANDO FL 32812

TITLE **D** DELETE
 NAME PEARSALL, MAURICE R
 STREET ADDRESS 1935 S CONWAY RD, A-1
 CITY-ST-ZIP ORLANDO FL 32812

TITLE **D / S** DELETE Addition
 NAME SMITH, BETTY J
 STREET ADDRESS 1935 S CONWAY RD, E-2
 CITY-ST-ZIP ORLANDO FL 32812

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **D/P** Change Addition
 1.2 NAME GERTENBACH, JEAN A.
 1.3 STREET ADDRESS
 1.4 CITY-ST-ZIP

2.1 TITLE **D/ASST.T** Change Addition
 2.2 NAME RUBY P. RIGGS
 2.3 STREET ADDRESS 1935 S. CONWAY RD. F-4
 2.4 CITY-ST-ZIP ORLANDO, FLORIDA 32812

3.1 TITLE **D/ASST.S** Change Addition
 3.2 NAME PATRICIA M. HYDE
 3.3 STREET ADDRESS 1935 S. CONWAY RD. B-1
 3.4 CITY-ST-ZIP ORLANDO, FLORIDA 32812

4.1 TITLE **D/T** Change Addition
 4.2 NAME CHARLOTTE A. LENTZ
 4.3 STREET ADDRESS 1935 S. CONWAY RD. P-3
 4.4 CITY-ST-ZIP ORLANDO, FLORIDA 32812

5.1 TITLE **D/VP** Change Addition
 5.2 NAME
 5.3 STREET ADDRESS
 5.4 CITY-ST-ZIP

6.1 TITLE **D** Change Addition
 6.2 NAME GORDON F. CLARK
 6.3 STREET ADDRESS 1935 S. CONWAY RD. M-8
 6.4 CITY-ST-ZIP ORLANDO, FL. 32812

14. 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, with all other like empowered.

SIGNATURE:

[Signature]
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

2/15/99 (407) 249-1897

CR2E037 (11/98)