

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



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

DOCUMENT # 729859 (9)
1. Corporation Name
ISLE OF SAND KEY CONDOMINIUM ASSOCIATION INC.

**APPROVED
AND
FILED**
95 APR 25 AM 9:16
**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

Principal Place of Business Mailing Address
**1621 GULF BLVD.
CLEARWATER FL 34630** **1621 GULF BLVD.
CLEARWATER FL 34630**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified **06/05/1974** 3a. Date of Last Report **04/06/1994**
4. FEI Number **59-1633133** 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 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 Zip Country 29 Zip Country 30

9. Name and Address of Current Registered Agent
**MEZER, STEVEN H.
1212 COURT ST STE B
CLEARWATER FL 34616**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY - ST - ZIP
P	GARNEL, HAROLD	1621 GULF BLVD. #208	CLEARWATER FL
VP	SIMONE, TOM	1621 GULF BLVD #807	CLEARWATER FL
S	STEIN, PAT	1621 GULF BLVD., 302	CLEARWATER, FL 00000
T	DEUTSCH, MARSHALL	1621 GULF BLVD., 801	CLEARWATER FL
D	STROTHER, FORREST	1621 GULF BLVD #202	CLEARWATER FL
D	STROMANER, NELSON	1621 GULF BLVD., #204	CLEARWATER FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	1.2 NAME	1.3 STREET ADDRESS	1.4 CITY - ST - ZIP	Change	Addition
President	Patricia Stein	1621 Gulf Blvd. - #302=	Clearwater, FL 34630	☒	☐
Vice President	Dale Wagner	1621 Gulf Blvd. - #307	Clearwater, FL 34630	☒	☐
Secretary	Philip Blanks	1621 Gulf Blvd. #401	Clearwater, FL 34630	☒	☐
Treasurer	Leo Plotkin	1621 Gulf Blvd. #604	Clearwater, FL 34630	☒	☐
Director	Isabelle Costa	1621 Gulf Blvd. - #508	Clearwater, FL 34630	☒	☐
Director	Robert Meadows	1621 Gulf Blvd. - #502	Clearwater, FL 34630	☒	☐

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 110.07(3)(k), 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:

Leo Plotkin
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

LEO PLOTKIN, SEC'y 4/14/95 (813) 596-8242
Daytona Beach

729059

ADDITIONAL DIRECTORS AS LISTED IN SECTION 13 --

ADDITION

7.1 Title	Director
7.2 Name	Michael Dumas
7.3 Street Address	1621 Gulf Boulevard - #PH/H
7.4 City-St-Zip	Clearwater, FL 34630