

FILE NOW: FILING FEE IS \$61.25

FILED

May 08 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Northam
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 729994 (4)

1. Corporation Name

TIGERTAIL BAY CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

111 FONTAINEBLEAU BLVD
CORAL GABLES FL 33172111 FONTAINEBLEAU BLVD
CORAL GABLES FL 33172-45073. Date Incorporated or Qualified
06/07/19743a. Date of Last Report
03/11/1996

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

29 30

4. FEI Number

59-1546097

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution☐\$5.00 May Be
Added to Fees8. 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

SKRLD, INC
201 ALHAMBRA CIR
STE 1102
CORAL GABLES FL 33134

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

FL

B5 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 PD
NAME DUTTON, DONN
STREET ADDRESS 2715 TIGERTAIL AVE., #504
CITY-ST-ZIP MIAMI FL☐ DELETETITLE D
NAME CARROL, DICK
STREET ADDRESS 2715 TIGERTAIL AVE., #508
CITY-ST-ZIP MIAMI FL☐ DELETETITLE DST
NAME LIGERMAN, DAVID
STREET ADDRESS 2715 TIGERTAIL AVE. #407
CITY-ST-ZIP MIAMI FL☐ DELETETITLE DVP
NAME COOKS, IVORY
STREET ADDRESS 2715 TIGERTAIL AVE., #603
CITY-ST-ZIP MIAMI FL☐ DELETETITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ DELETETITLE
NAME
STREET ADDRESS
CITY-ST-ZIP☐ DELETE1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIPPRESIDENT/D
HENRY V. "HANK" LIONE
2715 TIGERTAIL AVENUE, #205☒ Change ☐ Addition2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIPVICE-PRESIDENT/D
IVORY S. COOKS
2960 OAK AVENUE
COCONUT GROVE, FL. 33133☐ Change ☐ Addition3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIPSECRETARY/D
DICK CARROLL
2715 TIGERTAIL AVE., #508
COCONUT GROVE, FL. 33133☒ Change ☐ Addition4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIPTREASURER
DAVID LIGERMAN
2715 TIGERTAIL AVE. #407
COCONUT GROVE, FL. 33133☒ Change ☐ Addition5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP☐ Change ☐ Addition6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP☐ Change ☐ Addition

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0032512

CR2E037 (9/96)