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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # 732763

(8)

OCEAN INLET YACHT CLUB CONDOMINIUM ASSOCIATION,

Principal Place of Business

Mailing Address

FILED
May 08 1997 8:00am
Secretary of State

2100 N. PENINSULA AVE. NEW SMYRNA BEACH FL 32169		C/O BEACHSIDE RLTY MGT GROUP 2100 N PENINSULA AVE NEW SMYRNA BEACH FL 32169-6000 US		3. Date incorporated or Qualified	3a. Date of Las		
					05/14/1975	03/19/1	
·	al Place of Business	2a. Mailing Address		4. FEI Number 59-1672772	ļ	Applied For	
21		26	· · · · · · · · · · · · · · · · · · ·	<del></del>	39-10/2/12		Not Applicable
22	Apt #, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		5 Additional Required
City & S	State	City & State			6. Election Campaign Financing Trust Fund Contribution		00 May Be ed to Fees
Zip 24	Country 25	Zip 29	Countr 30	у	This corporation has liability for Florida Statutes	intangible tax unde Yes 🔲 No	or s. 199.032,
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Re	gistered Agent	
			81	Name			
MILLER, WILLIAM				Street A	Address (P.O. Box Number is Not Acceptable)		
147 VARIETY TREE CIRCLE ALTAMONTE SPRINGS FL 32169			83				······································
			84	1		FL	ip Code
11. Pursua	ant to the provisions of Sections 617.050	02 and 617.1508, Florida Statut	es, the abov	/e-named c	porporation submits this statement for the poration's board of directors. I hereby accept	ourpose of changin	g its registered
office	or registered agent, or both, in the State	of Florida, Such change was a	authorized b	y the corpo	oration's board of directors. I hereby accept	ot the appointment	as registered
		pations or, Section of Frodos, Fix	onoa statut				
SIGNATUR	Signature, typed or printed name of registered ag	ent and title if applicable. (NOT	E Registered Ac	ent signature re	equired when reinstating)	DATE	
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECT	ORS IN 12
TITLE	STD	DELETE	1.1 TITLE		γP	Chan	e Addition
NAME	DUVAL, EDNA		1.2 NAME		Fischer, Todd Kennett 2100 N Peninsula Ave	) Manual	
STREET ADDRE	A A . B		1.3 STREE	T ADDRESS	2100 N Peningula AVE	# 214	
CITY-ST-ZIP	1 - 1						
	I NEW SMYRNA BEACH FL	,	1.4 CITY-	1	New Smurna Beach F	L	
TITLE	NEW SMYRNA BEACH FL	DELETE	1.4 CITY- 2.1 TITLE	ST-ZIP	New Smyrna Beach F	L	ge Addition
	PD	DELETE	2.1 TITLE	ST-ZIP	New Smyrna Beach F	L	ge Addition
NAME	PD MILLER, WILLIAM	DÉLETE	21 TITLE 22 NAME	ST-ZIP	New Smyrna Beach F	L	geAddition
NAME STREET ADDRE	PD MILLER, WILLIAM  147 VARIETY TREE CIRCLE	DÉLETE	2.1 TITLE 2.2 NAME 2.3 STREE	ST-ZIP	New Smyrna Beach F D Mcclelland Kermit 2100 N Peninsula-Hic	L Chan	ge Addition
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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: WILLIAM TYPED OF PRINTED NAME OF SIGNING OFFICER OF DIRECTOR DIRECTOR DATE OF DIRECTOR DATE OF DIRECTOR DIRECTOR DATE OF DIRECTOR DIRECTOR DIRECTOR DATE OF DIRECTOR DATE OF DIRECTOR DIRECTOR