FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

SAME

1997

SIGNATURE:

22

DOCUMENT #
1. Corporation Name

(7)

MOSSEY COVE TOWNHOUSE OWNERS' ASSOCIATION, INC.

Principal Place of Business	Mailing Address				
825 INDIAN TRAIL DESTIN FL 32541	825 INDIAN TRAIL DESTIN FL 32541				
2. Principal Place of Business 21 3871 INDIAN TRALL	2a. Mailing Address				
Suite, Apt #, etc.	Suite, Apt. #, etc.				

FILED Mar 21 1997 8:00am Secretary of State



X

3a. Date of Last Report

04/04/1996

Applied For

\$8.75 Additional

Fee Required

Not Applicable

3. Date Incorporated or Qualified

05/30/1975

59-2047230

5. Certificate of Status Desired

City & State		City & State			1	6. Election Campaign	٠.	\$5.00 ☐ Added to		
23 Des7	Country	28	Coun	<u></u>		Trust Fund Contribu				
フロ 24 3256		Zıp	— −	ıı y		8. This corporation ha		angible tax under s. Yes 🏻 No	199.032,	
24 3254	9. Name and Address of Curre	nt Registered Agent	30			Florida Statutes				
				10. Name and Address of New Registered Agent 11 Name Robert Deface 22 Street Address (P.O. Box Number is Not Acceptable)						
00000	W HOLAST				Rob	ert Defor				
				82 Street Address (P.O. Box Number is Not Acceptable) 3871 INDIAN TRAIL						
	825 INDIAN TRAIL UNIT 5A			13	3011	INDIAN T	RAIL			
207 (HADINA TRAIL ON),	-)						
DESTIN FL 32541			[8	14 C	City_			85 Zip C	ode,	
		0 - 10474500 Et 14-0144			Des 7	<u>וא</u>		FL 325		
office or registered agent, or both, in the State of Florida, Such change was authorized by the corporation's board of directors. I bereby accept the appointment as registered.										
agent. I a	m familiar with, and accept the oblig	ations of, Section 617.0503, Fto	orida Statu	tes.						
SIGNATURE	Robert De For	Rober	er l)e	toe.			3-15-97		
	Signature, typed or printed name of registered ag			Agent si	gnature required v				3.D. 40	
12.		ID DIRECTORS DELETE	13. 11 TITL	<u> </u>		ADDITIONS/CHANG	ES TO OFFICE	Change	Addition	
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NAME	ROSDICK, JULIAN T		, 5.2 NAN		Mil	HAM MCCOIR	TUBLL	_	}	
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CITY - S1 - ZIF			6.4 CIT			0-2-2-0-2-2-5				
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.										

De Juli (1011111) Robert Defoe