FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 JAN 27 PM 4:15

DOCUMENT # 733360 (2)

1. Corporation Name
SEA ISLE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1101 W. OCEAN DRIVE P.O.BOX 151 KEY COLONY BEACH FL 33051	P. O. BOX 510151 KEY COLONY BEACH FL 33051 US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 07/23/1975
3a. Date of Last Report: 02/17/1994
4. FEI Number: 59-2252200 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

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

9. Name and Address of Current Registered Agent

BOWER, JEAN
1101 OCEAN DRIVE WEST SEA ISLE CONDO
KEY COLONY BEACH FL 33051

10. Name and Address of New Registered Agent

81 Name: Thomas Kennedy
82 Street Address (P.O. Box Number is Not Acceptable): 1101 Ocean Drive W.
83
84 City: Key Colony Bch. FL 85 Zip Code: 33051

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: Thomas Kennedy. President — 1/23/95
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	D	1.1 TITLE		☐ Change ☐ Addition
NAME	HAMILTON, MARGE	1.2 NAME		
STREET ADDRESS	1101 OCEAN DR. W.	1.3 STREET ADDRESS		
CITY-ST-ZIP	KEY COLONY BEACH FL	1.4 CITY-ST-ZIP		
TITLE	DV	2.1 TITLE		☐ Change ☐ Addition
NAME	LUCILLE, GILBERT	2.2 NAME		
STREET ADDRESS	1101 OCEAN DR. W.	2.3 STREET ADDRESS		
CITY-ST-ZIP	KEY COLONY BEACH FL	2.4 CITY-ST-ZIP		
TITLE	D	3.1 TITLE		☐ Change ☐ Addition
NAME	DENSMORE, RAY	3.2 NAME		
STREET ADDRESS	1101 OCEAN DR. W.	3.3 STREET ADDRESS		
CITY-ST-ZIP	KEY COLONY BEACH FL	3.4 CITY-ST-ZIP		
TITLE	D	4.1 TITLE	VP/D	☐ Change ☑ Addition
NAME	LYNCH, JEAN	4.2 NAME	Rusty Stevens	
STREET ADDRESS	1101 OCEAN DR. W.	4.3 STREET ADDRESS	1101 Ocean Dr. W	
CITY-ST-ZIP	KEY COLONY BEACH FL	4.4 CITY-ST-ZIP	Key Colony Bch. FL 33051	
TITLE	PD	5.1 TITLE	P/D	☑ Change ☐ Addition
NAME	~~BOWER, JEAN~~	5.2 NAME	Thomas Kennedy	
STREET ADDRESS	~~1101 OCEAN DR.~~ W.	5.3 STREET ADDRESS	1101 Ocean Dr W	
CITY-ST-ZIP	~~KEY COLONY BCH.~~ FL	5.4 CITY-ST-ZIP	Key Colony Bch. FL 33051	
TITLE	DST	6.1 TITLE	P/T	☑ Change ☐ Addition
NAME	~~THOMAS, SHARON~~	6.2 NAME	Edward Kampmeyer	
STREET ADDRESS	~~1101 OCEAN DR.~~ W.	6.3 STREET ADDRESS	1101 Ocean Dr W	
CITY-ST-ZIP	~~KEY COLONY~~ BEACH FL	6.4 CITY-ST-ZIP	Key Colony Bch. FL 33051	

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 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: Thomas Kennedy Pres. — 1/23/95 — 305.743.0179
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #