

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 736048 (0)
1. Corporation Name
200 OCEAN ROAD CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business
**1 TURTLE BEACH ROAD
VERO BEACH FL 32963**

Mailing Address
**1 TURTLE BEACH ROAD
VERO BEACH FL 32963**

3. Date Incorporated or Qualified
06/09/1976

3a. Date of Last Report
04/24/1995

4. FEI Number
59-1690628

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**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business
21 Suite, Apt. #, etc.
22 City & State
23 Zip
24 Country

2a. Mailing Address
26 Suite, Apt. #, etc.
27 City & State
28 Zip
29 Country

9. Name and Address of Current Registered Agent

**ROSE, MICHAEL L.
1 TURTLE BEACH ROAD
VERO BEACH FL 32963**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 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

TITLE	PD	☐ DELETE
NAME	BARNARD, DOUGLAS	
STREET ADDRESS	200 OCEAN RD APT 1A	
CITY - ST - ZIP	VERO BEACH FL	
TITLE	D	☐ DELETE
NAME	MORRIS, REUBEN	
STREET ADDRESS	#2A-200 OCEAN RD	
CITY - ST - ZIP	VERO BEACH FL	
TITLE	D	☐ DELETE
NAME	FARNSWORTH JR., THOMAS C	
STREET ADDRESS	200 OCEAN ROAD-APT. 2B	
CITY - ST - ZIP	VERO BEACH FL	
TITLE	S	☐ DELETE
NAME	BARKER, JOHN E	
STREET ADDRESS	1 TURTLE BCH RD	
CITY - ST - ZIP	VERO BCH FL	
TITLE	D	☐ DELETE
NAME	PETINGA, YVONNE I	
STREET ADDRESS	#3A-200 OCEAN RD	
CITY - ST - ZIP	VERO BEACH FL	
TITLE	AS	☐ DELETE
NAME	ROSE, MICHAEL L	
STREET ADDRESS	1 TURTLE BEACH ROAD	
CITY - ST - ZIP	VERO BEACH FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☒ Change ☐ Addition
5.2 NAME	Pettinga, Yvonne I.
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

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)(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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Michael L. Rose

April 16, 1996

407-231-1666

Date

Daytime Phone #

CF2E037 (12/95)