FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 1. Corporation Name

736048

(0)

200 OCEAN ROAD CONDOMINIUM ASSOCIATION, INC.

| Principal Place | of Business | Mailing Address | | | | | | i ibbiii ibbiii iiii biiib biiii | FO40 #1017 BJ | JOHN BUBUL OLDAN BU | IEII AIBII (BBI |
|--|--|---|---|--------------------|--------------------|--|--|---|---|---|--------------------|
| 1 TURTLE BEAC VERO BEACH F | | 1 TURTLE BEACH ROAD VERO BEACH FL 32963-3452 | | | | | | | | | |
| | | | | | | | | Date Incorporated or Qualified 06/09/1976 | 3a. D | 04/24/19 | eport 96 |
| 2. Principal Pl | ace of Business | 2a. Ma | 2a. Mailing Address | | | | | 4. FEI Number 59-1690628 | | Ar | oplied For |
| 21 | | 26 | <u> </u> | | | | | 08-1080020 | | | ot Applicable |
| Suite, Apt. + | W, BIC. | 27 | Suite, Apt. #, etc. | | | | | 5. Certificate of Status Desired | | | Additional equired |
| City & State |) | | City & State | | | | | 6. Election Campaign Financing | *************************************** | \$5.00 | |
| 23 | | 28 | ├ ¬ ' | | | | ' | Trust Fund Contribution | | Added t | |
| Zıp | Country | Zij | Zip Cou | | | | 8. This corporation has liability for intangible tax under s. 199.032, | | | . 199.032, | |
| 24 | 25 29 | | | 30 | | | | Florida Statutes Yes No | | | |
| Name and Address of Current Registered Agent | | | | | 641 | 10. Name and Address of New Registered Age | | | | Agent | |
| | | | | | 81 | Name | | | | | l |
| ROSE, MICHAEL L. | | | | 82 Street Addr | | | (P.O. Box Number is Not Accept | able) | | | |
| 1 Turtle Beach Road Vero Beach FL 32963 | | | | | | ······································ | | | | | |
| VENO DE | EACH PL 32803 | | | | 83 | | | · | | | |
| | | | | | 84 | City | | | FL | 85 Zip (| Code |
| 11. Pursuant t | to the provisions of Sections 617.050 | 2 and 617. | 1508, Florida Statut Such change was | es, the a | bove ad by | -named o | corporat | tion submits this statement for the | Durpose c | of changing it | is registered |
| agent I ar | egistered agent, or both, in the State in familiar with, and accept the oblig | ations of, Se | ection 617.0503, Fl | orida Sta | tutes | 3. | po. a., p., 1 | bound of official trivially acc | op. mo mp, | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | |
| SIGNATURE _ | Signature, typed or printed name of registered age | | alloatile AVO | T. B | | | en ou demail and | hen reinstating) | DATE | | |
| 12. | Signature, typied or printed name or registered age. OFFICERS AN | · · · · · · · · · · · · · · · · · · · | | 13. | in võe | ini signature, i | iadmiec wi | ADDITIONS/CHANGES TO OFF | | D DIRECTOR | RS IN 12 |
| TITLE | PD | 20000 | DELETE | 1.1 T | ITLE | | Ī | | | ☐ Change | ☐ Addition |
| NAME | BARNARD, DOUGLAS | | | 1.2 M | IAME | 1 | 1 | | | | |
| STREET ADDRESS | EET ADDRESS 200 OCEAN RD APT 1A | | | 1.3 STREET ADDRESS | | | ĺ | | | | |
| CITY-ST-ZIP | VERO BEACH FL | | | | | 17-21P | | | | | |
| TITLE | D | | ☐ DELETE | 2.1 TITL | | l | | | | Change | Addition |
| NAME | MORRISS, REUBEN | | | 2.2 N | 2.2 NAME | | | | | | |
| STREET ADDRESS | #2A-200 OCEAN RD | | | | 2.3 STREET ADDRESS | | | | | | |
| CITY - ST - ZIP | VERO BEACH FL | | | | ST-ZIP | T/I | · · · · · · · · · · · · · · · · · · · | | X Change | Addition | |
| TITLE | | | | 3.1 7 | | - 1 | | nsworth Jr., T | homas | | TTI MORIOII |
| NAME | FARNSWORTH JR., THOMAS 200 OCEAN ROAD-APT. 2B | U | | | IAME | | | Ocean Road, # | | • • | |
| STREET ADDRESS | VERO BEACH FL | | | 1 | | ADDRESS | | o Beach, FL 32 | | | |
| CITY-ST-ZIP TITLE | S S | | DELETE | 3.4, 4.1 T | | ST-ZIP | | O Beach, 12 32 | | Change | Addition |
| NAME | BARKER, JOHN E | | | - 1 | NAME | } | } | | | | |
| STREET ADDRESS | 1 TURTLE BCH RD | | | | | ADDRESS | İ | | | | |
| CITY-ST-ZIP | VERO BCH FL | | | | | 17-21P | , | | | | Ĭ |
| TITLE | D DELETE | | 5.1 T | | | | | | Change | Addition | |
| NAME | PETTINGA, YVONNE I | | | 5.2 | IAME |] | | | | | |
| STREET ADDRESS | #3A-200 OCEAN RD | | | 5.3 8 | TREET | ADDRESS | | | | | |
| CITY-ST-ZIP | VERO BEACH FL | | | 5.4 (| ITY-S | T-ZIP | ļ | | | | |
| TITLE | AS | | ☐ DELETE | | ITLE |] | | | | Change | Addition |
| NAME | ROSE, MICHAEL L | | | 6.21 | IAME | ĺ | 1 | | | | |

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP 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 of 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

SIGNATURE:

1 TURTLE BEACH ROAD

VERO BEACH FL

appears in Block 12 or Block 13 if change

STREET ADDRESS

#RE REQUIPATOhael L. Rose

Date

April 14, 1997 561-231-166

FILED

May 01 1997 8:00am

Secretary of State

Daytime Phone # 0020793