Applied For

Not Applicable

### FILE NOW: FILING FEE IS \$61.25

**NONPROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

#### **Katherine Harris**

Secretary of State **DIVISION OF CORPORATIONS** 

## **DOCUMENT # 736048**

1. Corporation Name

#### 200 OCEAN ROAD CONDOMINIUM ASSOCIATION, INC.

Р	rincipal	Pla	ice c	of Bus	iness
4	THOTH	E D	EACL	1 DOX	n

2. Principal Place of Business

Mailing Address

VERO BEACH FL 32963

Suite, Apt. #, etc.

21

22

1 TURTLE BEACH ROAD VERO BEACH FL 32963

2a. Mailing Address

Suite, Apt. #, etc.

26

# FILED Apr 23, 1999 8:00 am § Secretary of State

04-23-1999 90226 013 \*\*\*\*61.25



3. Date Incorporated or Qualifed

06/09/1976

59-1690628

4. FEI Number

City & Stat	е	City & State			5. Certificate of Status Desired		<b>\$8.75</b> A	,	
23		28						·	
Zip	Country	Zip Country			6. Election Campaign Financing		\$5.00		
24	25	<u> </u>	30		Trust Fund Contribution Added to Fees				
	9. Name and Address of Current I	Registered Agent	-   04	A1	10. Name and Address of New	Registered /	Agent		
			81	Name					
ROSE, MIC	CHAEL L.	82	Street A	ddress (P.O. Box Number is Not Accept	able)				
1 TURTLE	BEACH ROAD								
VERO BEA	ACH FL 32963		83					ļ	
			84	City			85 Zip C	ode	
						<u>FL</u>			
office or r	to the provisions of Sections 617.0502 egistered agent, or both, in the State of im familiar with, and accept the obligation	Florida Such change was au	lhonzed by	the corpor	orporation submits this statement for the ation's board of directors. I hereby acce	purpose of pt the appoir	changing its r ntment as reg	egistered istered	
SIGNATURE		ad tale if applicable (NOTE: E	Pacietered Age	t einenture rec	quired when reinstating)	DATE			
12.	Signature, typed or printed name of registered agent a OFFICERS AND		13.	it signature rec	ADDITIONS/CHANGES TO OF	FICERS AN	D DIRECTOR	RS IN 12	
TITLE	D OF FIGURE AND	□ DELETÉ	1.1 TITLE	T			Change	Addition	
NAME	BROPHY, VIRGINIA W.		1.2 NAME	1				į	
STREET ADDRESS	200 OCEAN ROAD #3B		1.3 STREE	T ADORESS					
CITY-ST-ZIP	VERO BEACH FL 32963		1.4 CITY- S	T-ZIP					
TITLE	D	☐ DELETE	2.1 TITLE				Change	Addition	
NAME	MORRISS, REUBEN		2.2 NAME				,		
STREET ADDRESS	#2A-200 OCEAN RD		2.3 STREE	T ADDRESS					
CITY-ST-ZIP	VERO BEACH FL		2.4 CITY-	T-ZIP					
TITLE	TD	☐ DELETE	3.1 TITLE				Change	Addition	
NAME	FARNSWORTH, JR. T C.		3.2 NAME						
STREET ADDRESS	200 OCEAN RD., #2B		3.3 STREE	T ADDRÉSS					
CITY-ST-ZIP	VERO BEACH FL		3.4. CITY-1	T-ZIP					
TITLE	S	☐ DELETE	4.1 TITLE				Change	Addition	
NAME	BARKER, JOHN E		4, 2 NAME					1	
STREET ADDRESS	1 TURTLE BCH RD		4.3 STREE	T ADDRESS					
CITY-ST-ZIP	VERO BCH FL		4.4 CITY-S	T-ZIP	10.00				
TITLE	D	☐ DELETE	5.1 TITLE				Change	☐ Addition	
NAME	PETTINGA, YVONNE I		· 5.2 NAME						
STREET ADDRESS	#3A-200 OCEAN RD		5.3 STREE	ADDRESS					
CITY-ST-ZIP	VERO BEACH FL		5.4 CITY-S	T-ZIP					
TITLE	AS	☐ DELETE	6.1 TITLE				Change	Addition	
NAME	ROSE, MICHAEL L		6.2 NAME						
STREET ADDRESS			6.3 STREE	TADDRESS					
CITY-ST-ZIP	VERO BEACH FL		6.4 CITY-S						
14. I hereby	certify that the information supplied with	this filing does not qualify for	the exempt	ion stated	in Section 119.07(3)(i), Florida Statutes.	I further cert	ify that the in	formation	

indicated on this annual report or supplemental aroual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am ar officer or director of the corporation on 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, with all other like empowered.

SIGNATURE:

April 16, 1999