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Feb 26 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **736959** (8)

1. Corporation Name

ANNA MARIA ISLAND PRIVATEERS, INC.

Principal Place of Business

Mailing Address

**4515 124TH ST CT WEST
CORTEZ FL 34216
US**

**PO. BOX 1126
CORTEZ FL 34216
US**

2. Principal Place of Business

2a. Mailing Address

21 2703 17th AVE WEST

26 2703 17th AVE WEST

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 BRADENTON, FL

28 BRADENTON, FL

24 Zip

25 Country

29 Zip

30 Country

24 34205

25 MANASSA

29 34205

30 MANASSA

9. Name and Address of Current Registered Agent

3. Date Incorporated or Qualified

10/01/1976

4. FEI Number

59-1718904

Applied For

☒ Not Applicable

6. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☒ No

8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30.

☐ Yes ☒ No

10. Name and Address of New Registered Agent

81 Name

WEYMAN, STANLEY

82 Street Address (P.O. Box Number Is Not Acceptable)

2703 17th AVE WEST

83

84 City

BRADENTON

FL

85 Zip Code

34205

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

Stanley J. Weyman

STANLEY J. WEYMAN, TREASURER

1/26/98

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 **SWAGER, JOHN**
STREET ADDRESS **P.O. BOX 1354 N/A**
CITY - ST - ZIP **HOLMES BEACH FL 34217**

TITLE **TD** ☒ DELETE

NAME **MC KELVEY, NORMAN**
STREET ADDRESS **P.O. BOX 312**
CITY - ST - ZIP **ANNA MARIA FL**

TITLE **SD** ☒ DELETE

NAME **BEER, GRANT**
STREET ADDRESS **6937 HARBOR OAKS CIR**
CITY - ST - ZIP **BRADENTON FL**

TITLE **VD** ☒ DELETE

NAME **MADDOX, RICK**
STREET ADDRESS **P.O. BOX 1126 N/A**
CITY - ST - ZIP **CORTEZ FL**

TITLE **D** ☒ DELETE

NAME **WALLACE, AL**
STREET ADDRESS **3914 29TH AVE W.**
CITY - ST - ZIP **BRADENTON FL 34205**

TITLE **D** ☒ DELETE

NAME **STOKES, WILL**
STREET ADDRESS **2506 NIGHTINGALE LN**
CITY - ST - ZIP **BRADENTON FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE **PD** ☒ Change ☒ Addition

1.2 NAME **MADDOX, RICK**
1.3 STREET ADDRESS **~~4515 124th St West~~ 4515 124th St West**
1.4 CITY - ST - ZIP **CORTEZ, FL 34215-1126**

2.1 TITLE **TD** ☒ Change ☒ Addition

2.2 NAME **WEYMAN, STANLEY**
2.3 STREET ADDRESS **2703 17th AVE W.**
2.4 CITY - ST - ZIP **BRADENTON, FL 34205**

3.1 TITLE **SD** ☒ Change ☒ Addition

3.2 NAME **WITTON, BRUCE**
3.3 STREET ADDRESS **509 HILLCREST DR N.W.**
3.4 CITY - ST - ZIP **BRADENTON, FL 34209**

4.1 TITLE **VD** ☒ Change ☒ Addition

4.2 NAME **STEWART, MITCH**
4.3 STREET ADDRESS **217 46th St. W.**
4.4 CITY - ST - ZIP **BRADENTON, FL 34209**

5.1 TITLE **D** ☒ Change ☒ Addition

5.2 NAME **JACKSON, BARRY**
5.3 STREET ADDRESS **P.O. Box 1941 N/A**
5.4 CITY - ST - ZIP **HOLMES BEACH, FL 34218**

6.1 TITLE **D** ☐ Change ☒ Addition

6.2 NAME **STOKES, WILL**
6.3 STREET ADDRESS **2506 NIGHTINGALE LN**
6.4 CITY - ST - ZIP **BRADENTON, FL 34209**

14. I 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.

SIGNATURE: *Stanley J. Weyman* **Stanley J. Weyman** **1/26/98** **944-747-7778**

CR2E037 (10/97)