FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Apr 22, 1999 8:00 am § Secretary of State

04-22-1999 90134 038 ****61.25

DOCUMENT # 738251

1. Corporation Name

BAY ISLES BAYOU ASSOCIATION, INC.

DAT TOLLS DATED ACCOUNTION	i, 1140·			
Principal Place of Business P.O. BOX 8036 LONGBOAT KEY FL 34228	Mailing Address P.O. BOX 9036 LONGBOAT KEY FL 34228			
2. Principal Place of Business	2a. Mailing Address		3. Date Incorporated or Qualifed	
21	26		03/03/1977	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		4. FEI Number	Applied For
22	. 27		<u> </u>	_ Not Applicable
City & State	City & State		5. Certificate of Status Desired	\$8.75 Additional Fee Required
Zip Country	Zip	Country	6. Election Campaign Financing	\$5.00 May Be
24 25	29 . 30	0	Trust Fund Contribution	Added to Fees
9. Name and Address of Curr	ent Registered Agent		10. Name and Address of New Re	gistered Agent
SUNDHEIMER, STEPHEN 3421 BAYOU SOUND		81 Name 82 Street Add	AARTIN COOPER ress (P.O. Bo) Number is Not Acceptable 140 BAYOU SOU	
LONGBOAT KEY FL 34228		03		
		84 City L	ONGBOAT KEY	FL 85 Zip Code 34228
11. Pursuant to the provisions of Sections 617.0 office or registered agent, or both, if the Sta agent. I am families of the obline obline of the obline obl	502 and 647.1508, Florida Statutes, te of Florida. Such change was auth gations of Section 617.6503, Florida	, the above-named corporation and the corporation of the corporation and the corporation of the corporation	poration submits this statement for the poon's board of directors, I hereby accept	ourpose of changing its registered the appointment as registered
SIGNATURE Signature typed of printed name of registered a	gent and title if applicable. (NOTE: Re	egistered Agent signature require	od when reinstating)	DATE
	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12
TITLE D	X DELETE	1.1 TITLE D		☐ Change ☐ Addition
NAME KREILICK, ROBERT		1.2 NAME .]	TACK KLOPSTAD	
STREET ADDRESS 3211 BAYOU SOUND		13 STREET ADDRESS	3271 RAVOU SOUND	
1 01/000 AT 1/EV EI		1.4 CITY-ST-ZIP	ONGBOATKEY FL	34228
CITY-ST-ZIP LONGBUAT KEY FL		LA CHITASIAZIE	······································	-,

Addition DELETE. Change 2.1 TITLE TITLE MARTIN COOPER 3140 BAYOU SOUND 2.2 NAME SUNDHEIMER, STEPHEN NAME 2.3 STREET ADDRESS 3421 BAYOU SOUND STREET ADDRESS LONGBOAT KEY, FL 34228_ LONGBOAT KEY FLT 2.4 CITY-ST-ZIP CITY-ST-ZIP Addition Change ☐ DELETE 3.1 TITLE TITLE VPD 3.2 NAME WEBER, EMMETT (Spelling correction) WEBER, ENNETT NAME 3411 BAYOUSOUND 3.3 STREET ADDRESS STREET ADDRESS **LONGBOAT KEY FL 34228** 3.4. CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition X DELETE DE SANTO 4.1 TITLE TITLE MARIA 4.2 NAME BAYOU SOUND STRASSER, ALBERT NAME 3440 3395 BAYOU LANE 4.3 STREET ADDRESS STREET ADDRESS LONGBOAT KEY, FL 34218 4.4 CITY-ST-ZIP LONGBOAT KEY FL CITY-ST-ZIP Change □ DELETE President 5.1 TITLE TITLE ÐΡ 5.2 NAME KLOPSTAD, TERRY (Spelling Correction) SLOPSTAD, TERRY NAME 5.3 STREET ADDRESS 3271 BAYOU SOUND STREET ADDRESS 5.4 CITY-ST-ZIP LONGBOAT KEY FL 34228 CITY-ST-ZIP 6.1 TITLE Change Addition | □ DELETE TITLE 6.2 NAME NAME

CITY-ST-ZIP 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 accorate 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 on the reveiver 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 of the corporation of the corpo

6.4 CITY-ST-ZIP

6.3 STREET ADDRESS

SIGNATURE

STREET ADDRESS