FILE NOW: FILING FEE IS \$61.25

Mailing Address

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 739900

Principal Place of Business

TITLE

CITY-ST-ZIP

TD

MALAXOS, BILL

CLEARWATER FL

STREET ADDRESS 736 ISLAND WAY #704

736 ISLAND WAY ASSOCIATION, INC.

7850 ULMERTO LARGO FL 337 US									
— ··	lace of Business	2a. Mailing Address				3. Date Incorporated or Qualifed 08/15/1977			
Suite, Apt.	# oto	Suite, Apt. #, etc.				4. FEI Number Applied For			
	#, etc.	27	-			59-1762876	 	Applicable	
City & Stat		City & State				_	\$8.75 A		
23	-	28	8			5. Certifcate of Status Desired	Fee Re	quired	
Zip	Country	Zip				6. Election Campaign Financing	\$5.00	May Be	
24	25	29 30	<u> </u>			Trust Fund Contribution	Added to	Fees	
	9. Name and Address of Current	Registered Agent		7		10. Name and Address of New Registered	Agent		
			81	Nam	е			-	
HOLIDAY ISLES PROPERTY MGMT.,INC.				Stree	t Addre	Iress (P.O. Box Number is Not Acceptable)			
STE 1									
LARGO FL 33771			83	'					
			84	City		· . FL	85 Zip C	ode	
11. Durance to the provisions of Sections 617 0502 and 617 1508. Florida Statutes, the above-pared comporting submits this statement for the purpose of								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: Regis				nt signatur	e required v	when reinstating) DATE			
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OFFICERS A			
TITLE	TD	☐ DELETE	1.1 TITLE		PD	T DNG D T GIT TO	Change	Addition	
NAME	BOBLENZ, RICHARD		1.2 NAME		1736	BLENZ, RICHARD		-	
STREET ADORESS	750 IODAID WAT, #900			13 STREET ADDRESS 736 ISLAND WAY, #906 CLEARWATER, FL 33767					
CITY-ST-ZIP	CLEARWATER FL	(X) DELETE	1.4 CITY-8	ST-ZIP			[] Change	Addition	
TITLE	D	TS DELETE	2.1 TITLE		SD	NV MADDEN	[] Change	X radition	
NAME	nascrien, Mascri		2.2 NAME						
STREET ADDRESS	30 IOLAND WAT #1104		2.3 STREET ADDRESS / 3 t 2.4 CITY-ST-ZIP		CLE	S ISLAND WAY, #306 - CARWATER, FL 33767		-	
CITY-ST-ZIP			2. 4 CITY-	SI-ZIP			Change	Addition	
TITLE			3.2 NAME		שמכ	OURIS, JAMES	XX	_	
NAME expect annuese	1000nio, Jim					·			
STREET ADDRESS CITY-ST-ZIP	700 IODAND WAT #50E			3.4. CITY-ST-ZIP		SARWATER, FL 33767		į	
TITLE			4.1 TITLE				Change	Addition	
NAME	WATSON, DOLLY			D. WITCHE DEPOSI					
	WATOON, DOLLT		4.3 STREE	TREET ADDRESS 736 ISLAND WAY, #201					
CITY-ST-ZIP	,		4.4 CITY-5	CLE.		EARWATER, FL 33767			
TITLE			5.1 TITLE		TD	·			
NAME	SARKER, WALTER JR.		5.2 NAME			INING, RICHARD G.			
STREET ADDRESS	736 ISLAND WAY #701		5.3 STREE	TADDRES		5 ISLAND WAY, # 1101			
CITY-ST-ZIP	CLEARWATER FI		5.4 CITY-5	ST-ZIP	CLE	EARWATER, FL 33767			

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 suppliemental 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, with all other like empowered. SIGNATURE:

☐ OELETE

61 TITLE

6.4 CITY-ST-ZIP

VPD

6.3 STREET ADDRESS 736 ISLAND WAY,

MALAXOS, WILLIAM

CLEARWATER, FL

727-461-5488(R) JAW 12, 1999

#704

33767

FILED

03-06-1999 90141 043 ****61.25

Mar 06, 1999 8:00 am § Secretary of State

Change

☐ Addition