FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 **DOCUMENT #**

740104

(5)

1. Corporation Name														
ANTIGUA CONDOMINIUM ASSOCIATION, INC.														
Miliant Adirection traces in the man														
Principal Place of Business Mailing Address											161 91911 81	0 0 0 0 0	inti etati itë:	

CLEANWAIER	FL 34021			OLEANNA	OLEHRIMIER TE OFOET SOFO					3. Date Incorporated or Qualified	3a. Da	ate of Last Re	eport	
									09/09/1977	<u></u>	02/02/19	96		
2. Principal P	ace of Busi	ness		2a. Mailing Address					4. FEI Number 59-1794533			plied For		
21 Cuite Ani	# oto			Suite, Apt. #, etc.					39-1794333			t Applicable		
Suite, Apt.	#, etc.			⊢ ¬	27				:	5. Certificate of Status Desired		\$8.75 A		
City & State	e				City & State					6. Election Campaign Financing \$5.00 May Be				
23				28					Trust Fund Contribution Added to Fees					
Zip	ip Country				Zip Coi			1		8. This corporation has liability for intangible tax under s. 199.032,				
24	25			29						Florida Statutes				
9. Name and Address of Current Registered Agent								,		10. Name and Address of New Registered Agent				
								Name					ļ	
PROGRESSIVE MANAGEMENT, INC.							82	Street A	Addres	dress (P.O. Box Number is Not Acceptable)				
2753 S.R. 580, SUITE 207							83		_			······································		
CLEARWATER FL 34621								i						
								City		FL 85 Zip Code				
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 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 r													s 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 register agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.													registered	
SIGNATURE														
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered A									required	when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE	2 DIDECTOR	C IN 10	
12. TITLE	VD		OFFICERS AN				13.			ADDITIONS/CHANGES TO OFFIC	ERS AND	Change	Addition	
NAME	REICHN	IFR	PEGGY			1.2 N								
STREET ADDRESS			(EY RD #326				13 STREET ADDRESS							
CITY-ST-ZIP	LARGO			1			1.4 C/TY - ST - ZIP							
TITLE	TD			☐ DELETE			2.1 TITLE					Change	Addition	
NAME	URBAN	, MA	RILYN	2.			2.2 NAME							
STREET ADDRESS			IO'LE BLVD, # 12	7 2.3			2.3 STREE1 ADDRESS 920			09 SEMINOLE BLVD. #1	26			
CITY-ST-ZIP	<u>SEMIN</u>)LE I	<u></u>				2. 4 CITY - ST - ZIP							
TITLE	SD				DELETE	3.111		}				∐ Change	Addition	
NAME	BURNS					3.2 N								
STREET ADDRESS			(EY RD) #111					ADDRESS					ļ	
CITY-ST-ZIP	LARGO	<u>rl</u>			DELETE			ST-ZIP	D /	<u> </u>		Change	Addition	
TITLE NAME	DONAH	IVE	IEDDV		Deat it	4.1 TI 4. 2 N			Ρ/	U		Man Originate	ndultielf	
STREET ADDRESS			SERRI (EY ROAD, #313	<u>.</u>				ADDRESS						
CITY+ST-ZIP	LARGO		ILI NUMD, FOID	•				ST-ZIP						
TITLE	PD	<u>., </u>			DELETE	5.1 TI		/1 - 211	D			Change	Addition	
NAME	ETTELL, HARRY				5.2 N			1	_	OLSEN, BRUCE				
STREET ADDRESS 9700 STARKEY RD #317					E E			ADDRESS	971	9700 STARKEY ROAD #211				
CITY-ST-ZIP	LARGO						IY-S	ST - ZIP	_LAI	RGO FL 33777				
TITLE					DELETE	61 TI	1 LE					Change	Addition	
NAME						62 N	AME							
STREET ADDRESS 6							IREET	ADDRESS						

14. I do hereby certify that the information supplied with this filling 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.

1/11/07 612 201 1200

FILED

Jan 30 1997 8:00am

Secretary of State