

FILE NOW: FILING FEE IS \$61.25

FILED

May 07 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 740696 (0)
1. Corporation Name
THE KENTUCKY CLUB CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business 1536 SOUTH OCEAN DRIVE VERO BEACH FL 32963-2357	Mailing Address 1536 SOUTH OCEAN DRIVE VERO BEACH FL 32963-5335
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3. Date Incorporated or Qualified 11/04/1977	3a. Date of Last Report 04/26/1996
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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4. FEI Number 61-0941606	Applied For ☐ Yes ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
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8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No
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9. Name and Address of Current Registered Agent MCHUGH JR., JOHN JOSEPH 333 17TH ST., SUITE U VERO BEACH FL 32960

10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code
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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 _____ (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	#D ☐ DELETE
NAME	RONALD CARMICLE
STREET ADDRESS	1536 S.OCEAN DE.
CITY-ST-ZIP	VERO BCH FL
TITLE	PD ☐ DELETE
NAME	RICHARD C. PAGE
STREET ADDRESS	1536 S. OCEAN DR.
CITY-ST-ZIP	VERO BCH FL
TITLE	VPD ☐ DELETE
NAME	WILLIAM BELL
STREET ADDRESS	1536 S.OCEAN DR.
CITY-ST-ZIP	VERO BCH FL
TITLE	D ☐ DELETE
NAME	SUSAN RUSSELL
STREET ADDRESS	1536 S. OCEAN DR.
CITY-ST-ZIP	VERO BCH FL
TITLE	D ☒ DELETE
NAME	KAREN BELL BEAN
STREET ADDRESS	1536 S. OVEAN DR.
CITY-ST-ZIP	VERO BCH FL
TITLE	D ☒ DELETE
NAME	HAROLD MULLIS
STREET ADDRESS	1536 S. OCEAN DR.
CITY-ST-ZIP	VERO BCH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	☒ Change ☐ Addition
1.2 NAME	TD
1.3 STREET ADDRESS	Shelly Sweeney
1.4 CITY-ST-ZIP	1536 S Ocean Dr Vero Beach FL
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I do 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: *Sandra B. Mortham* **SIGNATURE REQUIRED** **4-22-97** **(561) 231-6712**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0020767

CR2E037 (9/96)