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Mar 04 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 742924 (4)

1. Corporation Name

COMMODORE CLUB CONDOMINIUM ASSOCIATION OF BURNT  
STORE MARINA, INC.

Principal Place of Business

9 PIRATES LANE  
PUNTA GORDA FL 33955

Mailing Address

9 PIRATES LANE  
PUNTA GORDA FL 33955-19633. Date Incorporated or Qualified  
05/19/19783a. Date of Last Report  
04/18/1996

2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City &amp; State

23

Zip

Country

24

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City &amp; State

28

Zip

Country

29

30

4. FEI Number

59-2014947

Applied For

Not Applicable

6. Certificate of Status Desired

☐\$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution☐\$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes☐ Yes ☐ No

9. Name and Address of Current Registered Agent

MEREDITH, DEBRA K  
3160 MATECUMBE KEY RD  
13515 BELL TOWN DR., STE. 101  
PUNTA GORDA FL 33955

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

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 DT ☐ DELETE  
NAME HOBART PARKER  
STREET ADDRESS 1610 ISLAMORADA #61-B  
CITY-ST-ZIP PUNTA GORDA FLTITLE D ☒ DELETE  
NAME MOYER, WILLIS  
STREET ADDRESS POST OFFICE BOX 578 N/A  
CITY-ST-ZIP ST MICHAELS MDTITLE DVP ☐ DELETE  
NAME OYER, HERB  
STREET ADDRESS 3 PIRATES LANE #33-A  
CITY-ST-ZIP PUNTA GORDA FLTITLE D ☐ DELETE  
NAME WUENSCH, FRED  
STREET ADDRESS 3 PIRATES LANE #33-B  
CITY-ST-ZIP PUNTA GORDA FLTITLE DS ☒ DELETE  
NAME STEITZ, WILLIAM  
STREET ADDRESS 3 PIRATES LANE #33-A  
CITY-ST-ZIP PUNTA GORDA FLTITLE DP ☒ DELETE  
NAME JAMES HOSTY  
STREET ADDRESS 1600 ISLAMORADA #72-B  
CITY-ST-ZIP PUNTA GORDA FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP2.1 TITLE ☐ Change ☒ Addition  
2.2 NAME JAMES, RUTH  
2.3 STREET ADDRESS 2 PIRATE'S LANE #24-B  
2.4 CITY-ST-ZIP PUNTA GORDA, FL 339553.1 TITLE ☐ Change ☐ Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP5.1 TITLE ☐ Change ☒ Addition  
5.2 NAME S/D  
5.3 STREET ADDRESS HOSTY, JANET  
5.4 CITY-ST-ZIP 1600 ISLAMORADA BLVD. #72-B  
PUNTA GORDA, FL 339556.1 TITLE ☐ Change ☒ Addition  
6.2 NAME P/D  
6.3 STREET ADDRESS BLACKA, EDWARD  
6.4 CITY-ST-ZIP ONE PIRATE'S LANE #14-A  
PUNTA GORDA, FL 33955

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0057838

CR2E037 (9/96)