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 #

743250

(3)

OCEAN MIST CONDOMINIUM ASSOCIATION, INC.

Country

9. Name and Address of Current Registered Agent

Principal Place of Business
% MARLIN INDUSTRIES INC 3603 PROSPECT AVE
RIVERA BEACH FL 33404

2. Principal Place of Business

Suite, 4pt. #, etc.

SOLES, PAUL C.

SIGNATURE:

City & State

Zip

21

22

24

Mailing Address

2a. Mailing Address

City & State

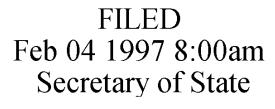
Zip

Suite, Apt. #, etc.

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27

% MARLIN INDUSTRIES INC 3603 PROSPECT AVE RIVERA BEACH FL 33404-3442





Yes No

8. This corporation has liability for intangible tax under s. 199.032,

10. Name and Address of New Registered Agent

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

3. Date Incorporated or Qualified 06/14/1978

59-1877336

5. Certificate of Status Desired

 Election Campaign Financing Trust Fund Contribution

Florida Statutes

Street Address (P.O. Box Number is Not Acceptable)

	OSPECT AVENUE		83						
HIVIEKA	BEACH FL 33404		63	{					ł
			84	City		FL 65	Zip C	ode	1
office or re	o the provisions of Sections 617.0502 and egistered agent, or both, in the State of Flo m familiar with, and accept the obligations	rida. Such change was au	thorized b	y the corp	corporation submits this statement for the purp coration's board of directors. I hereby accept the	ose of cha	nging its nent as	registered registered	1
SIGNATURE _	Signature, typed or printed name of registered agent and t	tle if applicable (NOTE:	Registered Ag	ent signature	required when reinstating)	DATE		·	
12.	OFFICERS AND DIR		13.	or agracio	ADDITIONS/CHANGES TO OFFICER		RECTOR	S IN 12	စြ
TITLE	PD	DELETE	1.1 TITLE				Change	Addition	966
NAME	MALISHER, RICHARD		1.2 NAME						
STREET ADDRESS	107 INLET WAY, UNIT #1		1.3 STREET ADDI		•				18
CITY-ST-ZIP	PALM BCH SHRS, FL 00000		1.4 C/TY-		· ·				CR2E037
TITLE	VD	DELETE	2.1 TITLE		v s		Change	Addition	[8
NAME	MANLEY, MICHAEL		2.2 NAME		, ,				1
STREET ADDRESS	107 INLET WAY, UNIT #2		2.3 STREE	T ADDRESS					
CITY-ST-ZIP	PALM BCH SHRS, FL 00000		2.4 CITY-ST-ZIP		•				1
TITLE	\$	DELETE	3 1 TITLE			X	Change	Addition	1
NAME	WAGNER, JANICE		3.2 NAME		Host, Janice	•			
STREET ADDRESS	107 INLET WAY, UNIT 4		3.3 STREE	T ADDRESS	, ,				1
CITY-ST-ZIP	PALM BCH SHRS FL		3.4. GITY-ST-ZIP		<u> </u>]
TITLE	TD	DELETE	4.1 TITLE				Change	Addition	1
NAME	BREAULT, RICHARD		4. 2 NAME						
STREET ADDRESS	107 INLET WAY, UNIT #3		4.3 STREE	T ADDRESS					1
CITY-ST-ZIP	PALM BCH SHRS FL		4.4 CITY -	ST-ZIP]
TITLE		DELETE	5.1 TITLE				Change	☐ Addition	
NAME			52 NAME						1
STREET ADDRESS			5.3 STREE	T ADDRESS					
CITY-ST-ZIP			5.4 CITY -	ST-ZIP	<u> </u>]
TITLE		DELETE	6.1 TITLE				Change	Addition	Į
NAME			6.2 NAME						1
STREET ADDRESS			6.3 STREE	T ADDRESS	·				
CITY-ST-ZIP			6.4 CiTY-]
informatio I am an o	n indicated on this annual report or supple	mental annual report is tru eceiver or trustee empowe	e and acc red to exe	urate and	stated in Section 119.07(3)(i), Florida Statutes. I I that my signature shall have the same legal of report as required by Chapter 617, Florida Statu	fect as if m	nade und	ter oath; that	

Country

81 Name

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