## FILE NOW: FILING FEE IS \$61.25

**NONPROFIT CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

(4)

## **FILED** Apr 14 1998 8:00am Secretary of State

MORTON VILLAGE CONDOMINIUM ASSOCIATION, INC.															
Principal Place of Business					Malling Address										
8400 94TH STREET WEST BRADENTON FL 94210					5400 34TH STREET WEST Bradenton FL 34210					3.	Date Incorporated or Qualified 09/18/1978				_
										4.	FEI Number			plied For	_
_	5	al Diret		1.5-	Santina delana						<u>59-1923361</u>		<del></del>	ot Applicable	<u>'</u>
—	2. Principal Place of Business			<u> </u>	2a. Mailing Address					5.	Certificate of Status Desired		\$8.75	Additional equired	
21	Suite, Apt. #, etc.			26]	Suite, Apt. #, etc.						Election Campaign Financing		\$5.00		-
22				27	27					υ.	Trust Fund Contribution		Added to		
City & State				City & State					7.	Is this nonprofit corporation a hom		associatio	n?	_	
23				28					□ Yes □ No						
Щ	Zip Country			<u> </u>	Zip Cou			ntry			This corporation owes or has paid				
24 25 9. Name and Address of Curren			29				Personal Property Tax due June 30.  10. Name and Address of New Registered					Yes No			
┝		y, realise	and Address of Curr	en negu	reten våetir		81	Name		10.	Maine and Address of New Megi	etereu m	JOHN.		-
	OTAM E	V DOAN					82								_
STANLEY, DOAN 5400 34TH ST W 4-D							Street	Addres	s (P	2.O. Box Number is Not Acceptable	)				
		TON FL 3					83	1							-
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							84	,				FL	II .	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 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. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.														ts registered registered	
	GNATURE														
		Signature, type(	or printed name of registered in			TE: Registere	od Ag	ent signatur	e required		reinstating) ADDITIONS/CHANGES TO OFFICE	DATE DC AND E	NECTOR	OC IN 12	_
12		PD	OFFICERS A	ND DIRE	DELETE	13.	ITI F		T		ADDITIONS/CHANGES TO OFFICE		Change	Addition	_ 1
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CI CI	IY-ST-ZIP	DHAUE	NTON, FL 00000	Lwith thin	filing does not qualify			ST-ZIP	ed in Se	entin	on 119.07(3)(i), Florida Statutes. I fu	inther cert	ify that the	information	_
'	Indicated officer or	on this anni director of ti	ual report or suppleme	ntal annu: eceiver or	al report is true and ac trustee empowered to	curate ar	nd tr	nat my sig	gnature	sha	all have the same legal effect as if no by Chapter 617, Florida Statutes; and	nade und	er oatn; tn	atiam an	