FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #1. Corporation Name

STREET ADDRESS

CITY-ST-ZIP

(7)

BANGA CONDOMINIUM, INC.

FILED Feb 05 1998 8:00am Secretary of State

I ANDARA INDIA MENAK DIRAK MASIA ANDAR INDIA MENJA MENJA MENJA MENJA MENJA MENJA MENJA MENJA

Dringing Diag	o of Ruelnogs	Mailing Address					
Principal Place of Business Mailing Address SEASTH AVE							
35-44TH AVE. ST.PETERSBURG BCH. FL 33706		35-44TH AVE. ST.PETERSBURG BCH. FL 33706			3. Date Incorporated or Qualified		
						02/26/1979 4. FEI Number Applied For	
						59-2872283 Not Applical	
2. Principal Place of Business 2a. Mailing Address						5. Certificate of Status Desired \$8.75 Additional	
21 26						Fee Required	
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			Election Campaign Financing \$5.00 May Be	
27 City & State City & State						Trust Fund Contribution Added to Fees	
23 28						7. Is this nonprofit corporation a homeowners association? The composition of the comp	
Zip	Country	Zip Country				8. This corporation owes or has paid the current year Intangible	
24	25 29 30		30			Personal Property Tax due June 30. Yes 🔀 No	
ļ	9. Name and Address of Curren	t Registered Agent		B1	Mana	10. Name and Address of New Registered Agent	
				١"	Name		
JOSEPH A. MIEZELIS				B2	Street Addr	dress (P.O. Box Number is Not Acceptable)	
35-44TH AVENUE ST PETE BEACH, FL			ļ.	B3			
33706				B4	City	85 Zip Code	
}					•	FL '	
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 regist office or registered agent, or both in the State of Florida, Such change was authorized by the corporation's board of directors. Thereby accept the appointment as registered							be d
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 .			TC 01-4			juired when reinstalling) DATE	
12.	Signature, typed or printed name of registered age OFFICERS AND		13.	ALCI	it argulatore require	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	☐ DELETE 1.1 T		.E		☐ Change ☐ Addit	tion
NAME	ARLAUSKIENE, KAZIMIERA 12		1.2 NAM	ΜE			
STREET ADDRESS 35 44TH AVE			1.3 STREET ADDRESS		ADDRESS		
CITY-ST-ZIP	ST PETE BEACH, FL 00000		1.4 CITY-S		- ZIP		
TITLE	DT	☐ DELETE	2.1 TITL		İ	Change Addit	tion
NAME	1011001		2.2 NAM				
STREET ADDRESS	35 - 44 AVENUE				ADDRESS		
CITY-ST-ZIP TITLE	ST PETE BEACH, FL 00000 PS	DELETE	2. 4 CIT 3.1 TITE		1-ZIP	Change Addit	tion
NAME	MIEZELIS, JOSEPH A.		3.2 NAM			— · –	
STREET ADDRESS	35-44TH AVE		3.3 STREE		ADDRESS		
CITY-ST-ZIP	ST PETE BEACH, FL 00000		3.4. CITY-		T-ZIP		
TITLE	Ď	☐ DELETE	4.1 TITU	E		☐ Change ☐ Addit	tion
NAME	Grusas, emilija		4. 2 NAME				1
STREET ADDRESS			4.3 STR	4.3 STREET ADDRESS			
CITY-ST-ZIP	ST PETE BEACH, FL 00000	- Delete	4.4 CIT		- ZIP	☐ Change ☐ Addit	lion
TITLE		☐ DELETE	5.1 TITU			Change Addit	HOIL
NAME PROFES ADDRESS	i I			5.2 NAME			
STREET ADDRESS				5.3 STREET ADDRESS 5.4 City-St-Zip			
CITY-ST-ZIP TITLE			6.1 TITE		+41	☐ Change ☐ Addit	tion
NAME		<u> </u>	62 NA			·	

6.3 STREET ADDRESS

6.4 CiTY-ST-ZIP

14. 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 fichanged, or on an attachment with an address.