## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## **Katherine Harris**

Secretary of State DIVISION OF CORPORATIONS

DOCL	JMENT	# .	7493	Q3
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1. Corporation Name

SEAGATE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business 2700 EASTBAY DR #107 LARGO FL 33771

Suite, Apt. #, etc.

2. Principal Place of Business

INDIAN SHOKES

19418 GULF BLUD

Mailing Address

PAREKH. COMMONS & CO 2700 EASTBAY DRIVE 107 LARGO FL 3371

Suite, Apt. #, etc.

2a. Mailing Address

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## FILED May 07, 1999 8:00 am Secretary of State

05-07-1999 90050 035 \*\*\*\*61.25



3. Date Incorporated or Qualifed

10/18/1979

59-2143789

4. FEI Number

Zip Country   Zip Country   St. Quality   St	City & State		City & State			-	E. Continue of Status Desired		\$8.75 A	dditional
Zip Country 2j 36 Country 2j 36 Country 2j 36 Country 2j 36 Country 35.00 May 8 Added to Fees 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 10. Name 10. N	23 337R	S U.S	28				5. Certicate of Status Desired		Fee Re	quired
9. Name and Address of Current Registered Agent  WEYLE, WALLACE J.D. 350 GULF BLVD INDIAN ROCKS BEACH FL 33705  63  10. Name and Address of New Registered Agent  63  64 City  FL  63  63  64 City  FL  65  65  65  65  66  67  67  68  68  68  68  68  68  68			Zip	(	Country		6. Election Campaign Financing		\$5.00	May Be
WEYUE, WALLACE J.D. 350 GULF BLVD INDIAN ROCKS BEACH FL 33705  82 Street Address (P.O. Box Number is Not Acceptable)  82 Street Address (P.O. Box Number is Not Acceptable)  83 Signature (Special Registered Agent)  84 City FL 85 Zip Code  84 City FL 85 Zip Code  85 Zip Code  86 City FL 85 Zip Code  86 City FL 85 Zip Code  87 City FL 85 Zip Code  88 Zip Code  89 Zip Code  89 Zip Code  89 Zip Code  89 Zip Code  80 Zip Code  81 Name  82 Street Address (P.O. Box Number is Not Acceptable)  82 Zip Code  83 Zip Code  84 City FL 85 Zip Code  84 City FL 85 Zip Code  85 Zip Code  86 Zip Code  86 Zip Code  87 Zip Code  88 Zip Code  89 Zip Code  90 Zip Code  9	24	25	29	30			Trust Fund Contribution			
WEYLE, WALLACE J.D. 350 GUIF BLVD INDIAN ROCKS BEACH FL 33705  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 register 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, and familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS 1  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 1  14. OFFICERS AND DIRECTORS 1  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 11 TIME  15. OFFICERS AND DIRECTORS 1  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Name  15. OFFICERS AND DIRECTORS 1  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Name  15. OFFICERS AND DIRECTORS 1  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Name  15. OFFICERS AND DIRECTORS 1  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Name  15. OFFICERS AND DIRECTORS 1  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Name  15. OFFICERS AND DIRECTORS 1  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Name  15. OFFICERS AND DIRECTORS 1  15. Name  15. OFFICERS AND DIRECTORS 1  15. Name  15. OFFICERS AND DIRECTORS 1  15. OFFICERS AND DIRE		9. Name and Address of Current	Registered Agent				10. Name and Address of New	Registered	Agent	
SSO GULF BLVD   INDIAN ROCKS BEACH FL 33705   83					81	Name				
SSO GULF BLVD   INDIAN ROCKS BEACH FL 33705   83	WEYLE W	ALLACE J.D.			82	Street Addr	ress (P.O. Box Number is Not Accep	table)		
INDIAN ROCKS BEACH FL 33705    63	·									
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 register 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, 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, 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, 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, or both, in the State of Florida. Such change was unforced by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such change was registered agent, or both, in the State of Florida. Such change was unforced by the corporation's board of directors. I hereby accept the appointment as registered agent, or both, in the State of Florida. Such floridations are registered agent. I have a property and the floridations are registered agent. I have a property accept the appointment as registered agent. I have a property accept the appointment as registered agent. I have a property accept the appointment as registered agent. I have a property accept the appointment as registered agent. I have a property accept the appointment as registered agent. I have a property accept the appointment as registered agent. I have a property accept the appointment as registered agent. I have a property accept the appointment as registered agent. I have a property accept the appointment as registered agent. I have a property accept the appointment as registered agent. I have a property accept the appointment accept the appointment accept and accept a property accept the appointmen		<del></del>			83					
The 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 register of agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.  SIGNATURE  S	indutino	, on o benon 1 c 00, 00			84	City			85 Zip C	ode
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 application of Section 617,0503, Florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 11. ITTLE  SD						•			<b>-</b>	!
12.	office or r	egistered agent, or both, in the State o	f Florida. Such chang	je was authori	ized by i	the corporation	oration submits this statement for th on's board of directors. I hereby acc	e purpose o ept the appo	f changing its intment as rec	registered gistered
12.	SIGNATURE		7 E-15	AIOTE: Desert		alesantura matulea	d whon minimized	DATE		
DELETE   1.1 TITLE   Change   A	12					Signature require			ND DIRECTO	RS IN 12
NAME   CARPENTER, SUSAN   12 NAME   13 STREET ADDRESS   1932 99TH AVENUE N   13 STREET ADDRESS   1932 99TH AVENUE N   14 CITY-ST-ZIP   TITLE   PD										☐ Addition
STREET ADDRESS   11932 99TH AVENUE N			_							
CITY-ST-ZIP   SEMINOLE FL 33772		· -				ADORESS				
TITLE				ſ		ſ				
NAME   WALLACE, J.D. W.   19418 GULF BLVD #401   23 STREET ADDRESS			□ DE			-21			Change	Addition
STREET ADDRESS   19418 GULF BLVD		• <del>-</del>								
INDIAN SHORES FL 33785   2.4 CITY-ST-ZIP		•				ADDRESS				
TITLE	i	[							<del></del> -	
NAME   SORACE, RICHARD A.   3.2 NAME   3.3 STREET ADDRESS   16502 AVILA BLVD   3.3 STREET ADDRESS   CITY-ST-ZIP   TAMPA FL 33613   3.4 CITY-ST-ZIP   TD						1-27			☐ Change	Addition
STREET ADDRESS   16502 AVILA BLVD   3.3 STREET ADDRESS   16502 AVILA BLVD   3.4 CITY-ST-ZIP   TAMPA FL 33613   3.4 CITY-ST-ZIP   TITLE   TD   Change   A										
TITLE   TO		· ·				ADORESS				
TITLE         TD         SDELETE         4.1 TITLE         Change         A           NAME         ELSNER, RICHARD         4.2 NAME         4.3 STREET ADDRESS           STREET ADDRESS         4740 N ALLAMANDRA DRIVE         4.3 STREET ADDRESS           CITY-ST-ZIP         BEVERLY HILLS FL 34465         4.4 CITY-ST-ZIP           TITLE         D         DELETE         5.1 TITLE           NAME         HILL, CHARLES         5.2 NAME           STREET ADDRESS         185 BELLAC         5.3 STREET ADDRESS           CITY-ST-ZIP         TALLAHASSEE FL 32303         5.4 CITY-ST-ZIP           TITLE         DELETE         6.1 TITLE         Change         A				1						
NAME   STREET ADDRESS   4740 N ALLAMANDRA DRIVE   4.3 STREET ADDRESS   4.4 CITY-ST-ZIP   BEVERLY HILLS FL 34465   4.4 CITY-ST-ZIP   5.1 TITLE   D			<b>₹</b> DE						Change	☐ Addition
STREET ADDRESS		1 -								
CITY-ST-ZIP						ADDRESS				
TITLE         D         DELETE         5.1 TITLE         Change         A           NAME         HILL, CHARLES         52 NAME         52 NAME         53 STREET ADDRESS         53 STREET ADDRESS         54 CITY-ST-ZIP         CITY-ST-ZIP         TALLAHASSEE FL 32303         DELETE         61 TITLE         Change         A		•• •• •• • • • • • • • • • • • • • •		1						
NAME HILL, CHARLES  STREET ADDRESS 185 BELLAC  CITY-ST-ZIP  TITLE  5.2 NAME  5.3 STREET ADDRESS 5.4 CITY-ST-ZIP  5.4 CITY-ST-ZIP  6.1 TITLE  Change		DETERMINED TO 07700	Ŭ DE						☐ Change	Addition
STREET ADDRESS 185 BELLAC 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP 5.4 CITY-ST-ZIP 6.1 TITLE 6.1 TITLE 6.1 TITLE 6.1 TITLE 6.1 TITLE 6.1 TITLE		HILL CHARLES		5	2 NAME					
CITY-ST-ZIP         TALLAHASSEE FL 32303         5.4 CITY-ST-ZIP           TITILE         DELETE         6.1 TITLE		<u> </u>		5	.3 STREET	ADDRESS				
TITLE DELETE 6.1 TITLE Change				5	.4 CITY-ST	-zip				
11166		INLLAIMOOLE FE 32000	[] DE			<del></del> -			☐ Change	Addition
NAME 6.2 NAME					2 NAME					
STREET ADDRESS 6.3 STREET ADDRESS				6	3 STREET	ADORESS				
STREET AUGUSTS	•	)								
14. I 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 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 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 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 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 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 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 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 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 supplied with the inform	14. I hereby o	Legify that the information supplied with	this filing does not o	ualify for the	exempti	on stated in S	Section 119.07(3)(i), Florida Statutes	. I further ce	ertify that the in	nformation

indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same regardence as it 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, with all other like empowered.

SIGNATURE:

WEYLIS

Applied For

Not Applicable