

FILE NOW: FILING FEE IS \$61.25

FILED
Apr 29, 1999 8:00 am
Secretary of State

04-29-1999 90276 037 ****61.25

0046784

NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
---	---	--

DOCUMENT # 749439

1. Corporation Name

VIA DEL MAR CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

1487 VIA MIGUEL
 JUPITER FL 33479

1487 VIA MIGUEL
 JUPITER FL 33479



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		10/22/1979	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		59-1837555	
24 Country		29 Country		30 Country	
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent	

INGLIS, STEVE
BRISTOL MANAGEMENT SERVICES
103 S US HWY 1 HFS-135
JUPITER FL 33418

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

Steve Inglis
 Signature, typed or printed name of registered agent and fee if applicable.

3/30/99
 (NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	1.1 TITLE	
NAME	CLARK, ROBERT	1.2 NAME	
STREET ADDRESS	1469 VIA DEL SOL	1.3 STREET ADDRESS	
CITY-ST-ZIP	JUPITER FL	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	
NAME	BROGAN, JAMES E	2.2 NAME	
STREET ADDRESS	1472 VIA DEL SOL	2.3 STREET ADDRESS	
CITY-ST-ZIP	JUPITER FL	2.4 CITY-ST-ZIP	
TITLE	SD	3.1 TITLE	VD
NAME	MCDONALD, CHARLES	3.2 NAME	MCDONALD, CHARLES
STREET ADDRESS	1481 VIA DEL SOL	3.3 STREET ADDRESS	1481 VIA DEL SOL
CITY-ST-ZIP	JUPITER FL 33477	3.4 CITY-ST-ZIP	JUPITER, FL 33477
TITLE	TD	4.1 TITLE	DKLINKER, ROBERT
NAME	MAIER, HELMUT	4.2 NAME	VIA MIGUEL
STREET ADDRESS	1472 VIA CAMERON	4.3 STREET ADDRESS	JUPITER, FL 33477
CITY-ST-ZIP	JUPITER FL 33477	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	SDSaunders, DOROTHY
NAME	REGER, BERNICE	5.2 NAME	1480 Via Miguel
STREET ADDRESS	1474 VIA PRIVADA	5.3 STREET ADDRESS	Jupiter, FL 33477
CITY-ST-ZIP	JUPITER FL 33477	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (1/98)