FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

1999 **DOCUMENT # 750375**

THE OUTRIGGER OWNERS ASSOCIATION, INC.

Principal Fla	ice of pusit
1555 N. A1A	HWY.
INDIAL ANTIC	FL 32903

Mailing Address

1555 N. A1A HWY. INDIALANTIC FL 32903

Apr 23, 1999 8:00 am § Secretary of State

04-23-1999 90045 006 ****61.25

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2. Principal P	lace of Business	2a. Mailing Address	·		3. Date Incorporated or Qualifed 12/26/1979	,			
21				<u></u>	1 7 - 1				
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			4. FEI Number Applied For				
2	AL STREET	27		·	59-2023953			Applicable	
City & Stat	te.	City & State			5. Certifcate of Status Desired		\$8.75 A		
:3	02.175		Country	,	6 Floation Compaign Financing		\$5.00	<u> </u>	
Zip	Country	·	30		Election Campaign Financing Trust Fund Contribution		Added to		
4	25		30		10. Name and Address of New	Registered			
	9. Name and Address of Current	Registered Agent	81	Name	To least dist Addition of the	1108.000			
							· · · · ·		
STRONGO)noff, robert		82	Street Add	ress (P.O. Box Number is Not Accep	table)	,	•	
1555 N H	IGHWAY A1A #203		83						
INDIALAN	TIC FL 32903		63						
			84	City			85 Zip C	ode	
	to the provisions of Sections 617.0502		-	l		<u> </u>		<u> </u>	
agent. I a SIGNATURE	to the provisions of Sections 617,0502 registered agent, or both, in the State c am familiar with, and accept the obligati Signature, typed or printed name of registered agent	ons or, Section 617.0503, Fiori	ida Statutes		ed when reinstating)	DATE			
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO O	FFICERS AN		RS IN 12	
TITLE	PD	☐ DELETE	1.1 TITLE				☐ Change	☐ Addition	
NAME	STROGONOFF, ROBERT		1.2 NAME			. 4			
STREET ADORESS	4 11 444 4000		1.3 STREE	TADDRESS	•			r	
CITY-ST-ZIP	INDIALANTIC FL.		1.4 CITY-5	ST-ZIP			• •		
TITLE	VPO	☐ DELETE	2.1 TITLE	20	orneau, Robert UP)	Change	☐ Additio	
NAME	CRISCI, VICTOR		2.2 NAME	15	- Morneau, Robert 55 N. Hug. AIN #501		•		
STREET ADORESS			23 STREE	TADDRESS 15	55 N. HIOY. ALL # 501				
	INDIALANTIC FL		2. 4 CITY-	ST-719	ndialandic, 71.329	103	•		
CITY-ST-ZIP	TD	O DELETE	- 3.1.TITLE		ACTION OF THE OPEN		☐ Change -	Additio	
NAME	SAMITAS, DANIEL		3.2 NAME						
	11 1848/ 144 000			T ADDRESS			•		
STREET ADDRESS	INDIALANTIC FL		3.4. CITY-					•	
CITY-ST-ZIP	DS .	☐ DELETE	4.1 TITLE	31-EIF			☐ Change	Additio	
TITLE			4.1 MILE						
NAME	VOGEDING, CARLEEN		4, Z NAME	[

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 comporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in officer or director of the corpor Block 12 or Block 13 if change other like empowered

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

517TRF

5.2 NAME

6.1 TITLE

6.2 NAME

SIGNATURE:

TITLE

NAME

TITLE

NAME

STREET ADORESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

1555 N HWY A1A 302

1555 N HIGHWAY A1A #403

INDIALANTIC FL

KELLY, JAMES

INDIALANTIC FL

DELETE

DELETE

☐ Change

Change

☐ Addition

☐ Addition