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 #

SIGNATURE:

CANAVERAL SANDS CONDOMINIUM ASSOCIATION, INC.

FILED Apr 30 1998 8:00am Secretary of State

Principal Place of Business Mailing Address			1 12001 12001 1100 1100 1100 1100 1100		
1980 N. ATLANTIC AVE. 701 COCOA BEACH F 32931 US	1980 N ATLANTIC AVE. 701 COCOA BEACH FL 32931 US		3. Date Incorporated or Qualified 02/26/1980 4. FEI Number Applied For Not Applied be Not Applied For Not Applied be Not Applied For Not Appl		
Principal Place of Business 21	2a. Mailing Address 26		5. Certificate of Status Desired S8.75 Add Fee Requi	ditional	
Suite, Apt. #, etc.	Suite, Apt. #, etc.		6. Election Campaign Financing \$5.00 May Trust Fund Contribution Added to Fe	•	
City & State	City & State		7. Is this nonprofit corporation a homeowners association? Yes No		
Zip Country 24 25	29 30	untry	8. This corporation owes or has paid the current year Intangent Personal Property Tex due June 30. Yes		
9. Name and Address of Curre	ent Registered Agent	81 Name	10. Name and Address of New Registered Agent		
DAVIS, PETEY 1980 N ATLANTIC AVE STE 701		82 Street Address (P.O. Box Number is Not Acceptable) 83			
COCOA BEACH FL 32931	02 and 617 1509 Florida Statutos, the a	84 City	FL 85 Zip Coc		

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										
12.	Signature, typed or printed name of registered agent and title if app. OFFICERS AND DIRECTOR	1		e required when reinstating)	DATE					
			13.	ADDITIONS/CHANGES TO OF						
TITLE	DVP	DELETE	1.1 TITLE	80 Peagy Sur Shruat	☐ Change	Addition				
NAME	SMALLY, ED		1.2 NAME	80 Pragy Sur Shruat 8494 Ridgewood Cape Canaveral	Aven 4304	ł				
STREET ADDRESS	8500 RIDGEWOOD #506		1.3 STREET ADDRESS	Com Concurred	FC 32920					
CITY-ST-ZIP	CAPE CANAVERAL FL		1.4 CITY - ST - ZIP	Cape carrassis						
TITLE	SD	DELETE	2.1 TITLE	PD	Change	Addition				
NAME	MCKENZIE, MARY		2.2 NAME							
STREET ADDRESS	8498 RIDGEWOOD AVE #2302		2.3 STREET ADDRESS							
CITY-ST-ZIP	CAPE CANAVERAL FL 32920		2 4 CITY-ST-ZIP							
TITLE	DP	☐ DELETE	3.1 TITLE	OT	Change Change	Addition				
NAME	ERNST, MARY		32 NAME	1. 3	·					
STREET ADDRESS	8494 RIDGEWOOD AVE 4305		3 3 STREET ADORESS							
CITY-ST-ZIP	CAPE CANAVERAL FL		3 4. CITY-ST-ZIP							
TITLE	DT	DELETE	4.1 TITLE		☐ Change	Addition				
NAME	HALL, MARY		4. 2 NAME			ľ				
STREET ADDRESS	8500 RIDGEWOOD AVE #1106		4.3 STREET ADDRESS							
CITY-ST-ZIP	CAPE CANAVERAL FL 32920		4.4 CITY-ST-ZIP							
TITLE	D	DELETE	5.1 TITLE		☐ Change	Addition				
NAME	MARTONE, CAROL	, ,	5.2 NAME							
STREET ADDRESS	8498 RIDGEWOOD AVE., 2203		5.3 STREET ADDRESS							
CITY-ST-ZIP	CAPE CANAVERAL FL		5.4 CITY - ST - ZIP							
TITLE		DELETE	6.1 TITLE		Change	Addition				
NAME			6.2 NAME							
STREET ADDRESS			6.3 STREFT ADDRESS							

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated indicated on this annual report or supplemental annual report is true and accurate and that my sign officer or director of the corporation or the receiver or trustee empowered to execute this report as Block 12 or Block 13 if changed, or on an attachment with an address:

(3)(i), Florida Statutes, I further certify that the information the same legal effect as if made under oath; that I am an apter 617, Florida Statutes; and that my name appears in