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**NONPROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 751374

1. Corporation Name

SCOTTISH TOWERS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

INC.
464 N PAULA DR
DUNEDIN FL 34698

Mailing Address

INC.
464 N PAULA DR
DUNEDIN FL 34698



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

03/04/1980

4. FEI Number

59-1977516

Applied For

Not Applicable.

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

MEZER, P A STEVEN H
1212 COURT ST STE B
CLEARWATER FL 33756

10. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE P ☒ DELETE
NAME BERRY, LINDA
STREET ADDRESS 464 N PAULA DR STE 302
CITY-ST-ZIP DUNEDIN FL 34698

TITLE T ☐ DELETE
NAME GATES, LESTER
STREET ADDRESS 464 N PAULA DR STE 116
CITY-ST-ZIP DUNEDIN FL 34698

TITLE D ☒ DELETE
NAME BONASORO, SALVATORE
STREET ADDRESS 464 N PAULA DR STE 223
CITY-ST-ZIP DUNEDIN FL 34698

TITLE D ☒ DELETE
NAME MCBRIDE, PATRICK
STREET ADDRESS 464 N PAULA DR STE 119
CITY-ST-ZIP DUNEDIN FL 34698

TITLE D ☒ DELETE
NAME STAR, B J
STREET ADDRESS 464 N PAULA DR STE 114
CITY-ST-ZIP CONCORD TOWNSHIP OH 34698

TITLE D ☒ DELETE
NAME STEGMANN, DON
STREET ADDRESS 464 N PAULA DR STE 205
CITY-ST-ZIP DUNEDIN FL 34698

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

P/S/D
RANSOM, RUTH
464 N. Paula Drive #206
Dunedin, FL 34698

☐ Change ☒ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

T/D

☒ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

V/D...
LILLEY, ERNEST
464 N. Paula Drive #222
Dunedin, FL 34698

☐ Change ☒ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

D
RIPPEY, GARY
464 N. Paula Drive #319
Dunedin, FL 34698

☐ Change ☒ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

D
PITOSCIA, ANTHONY
7144 Pine Grove Dr. SE
Hubbard, OH 44425

☐ Change ☒ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

D
SANDERS, ERNEST
464 N. Paula Drive #305
Dunedin, FL 34698

☐ Change ☒ Addition

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: *Lester Gates* **LESTER GATES** Gates

Date

Daytime Phone #

4/1/99 (727) 734-2793

0072803

CR2E037 (11/98)

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ADDITIONAL INFORMATION FOR:

Document # 751374

Corporation Name: SCOTTISH TOWERS CONDOMINIUM ASSOCIATION, INC.

FEI Number: 59-1977516

Box 13

Addition

7.1)	Title	D
7.2)	Name	LIPPINCOTT, ROBERT
7.3)	Street Address	880 Main Street
7.4)	City-St-Zip	Roebling, NJ 08554-1509
