

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
**1999**



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

**FILED**  
**Apr 19, 1999 8:00 am**  
**Secretary of State**

04-19-1999 90001 011 \*\*\*\*61.25

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**DOCUMENT # 751454**

1. Corporation Name

**PALM-AIRE AT SARASOTA CONDOMINIUM ASSOCIATION "D", INC.**

Principal Place of Business

2055 WOOD ST - STE 202  
PO BOX 6165  
SARASOTA FL 34237

Mailing Address

2055 WOOD ST - STE 202  
PO BOX 6165  
SARASOTA FL 34237



347685-90001-11



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

03/10/1980

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number

59-2009897

Applied For

Not Applicable

22

27

City & State

City & State

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

23

28

Zip Country

Zip Country

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**PROPERTY & ACCOUNTING MGMT**  
**2055 WOOD STREET - STE 202**  
**SARASOTA FL 34237**

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **SD** ☒ DELETE  
NAME **WRIGHT, KATHERINE**  
STREET ADDRESS **7130 FAIRWAY BEND LANE**  
CITY-ST-ZIP **SARASOTA FL**

1.1 TITLE ☐ Change ☒ Addition  
1.2 NAME **Kingsbury, Raymond**  
1.3 STREET ADDRESS **7169 Fairway Bend Circle**  
1.4 CITY-ST-ZIP **Sarasota, FL 34243**

TITLE **VD** ☐ DELETE  
NAME **MCCOWAN, THOMAS**  
STREET ADDRESS **7111 FAIRWAY BEND LAND**  
CITY-ST-ZIP **SARASOTA FL**

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

TITLE **PD** ☐ DELETE  
NAME **WARNER, GEORGE**  
STREET ADDRESS **7089 FAIRWAY BEND LANE**  
CITY-ST-ZIP **SARASOTA, FL 00000**

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

TITLE **TD** ☐ DELETE  
NAME **FRED HENZE**  
STREET ADDRESS **7138 FAIRWAY BEND CIRCLE**  
CITY-ST-ZIP **SARASOTA FL**

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

TITLE **D** ☐ DELETE  
NAME **WILLIAM GUBAS**  
STREET ADDRESS **7119 FAIRWAY BEND LANE**  
CITY-ST-ZIP **SARASOTA FL**

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

TITLE **D** ☐ DELETE  
NAME **BISULK, HERBERT**  
STREET ADDRESS **7112 FAIRWAY BEND CIRCLE**  
CITY-ST-ZIP **SARASOTA FL 34243**

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
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

4/6/99

941-351-5102

Date

Daytime Phone #

CR2E037-(1/98)