FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

1. Corporation Name 751473

(0)

SEA TURTLE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business Mailing Address							1 480114 EARD) OFIEF 11011 OLDER 12000	IHLE BLUIT BADOL	MANUAL MANUAL MA	
7201 RIDGEWOX CAPE CANAVER			7201 RIDGEWOOD AVE CAPE CANAVERAL FL 32920-3114							
							3. Date Incorporated or Qualified 03/10/1980		of Last Re 13/21/198	
2. Principal Pia 21	ace of Business	2a. Mailing Addr	ess				4. FEI Number 59-2296008			plied For t Applicable
Suite, Apt 1	#, etc.	Suite, Apt. #,	etc.				5. Certificate of Status Desired		\$8.75 A Fee Re	
City & State	3	City & State					Election Campaign Financing Trust Fund Contribution		\$5.00 Added to	
Zip			ountry	, at this corporation has madinity to		~ `				
24	25 29 30 9. Name and Address of Current Registered Agent				Florida Statutes Yes No 10. Name and Address of New Registered Agent					
	9. Name and Address of Cl	arrent Registered Agent		B1	Name	}	U. Name and Address of New Ne	haracan wi	Join .	
MADOUE	erite d Merrigan						10.0 D. H. L. C. N. J.			
7201 RIC	OGEWOOD AVE #24		63			Address	(P.O. Box Number is Not Acceptab	10)		
CAPE CA	ANAVERAL FL 32920			63						
				84				FL	85 Zip (
11. Pursuant t office or re agent. Lar	to the provisions of Sections 617 egistered agent, or both, in the t m familiar with, and accept the o	7.0502 and 617.1508, Florio State of Florida. Such chan obligations of, Section 617.	da Statutes, the ige was authoriz .0503, Florida St	abov ed by atute	e-named y the corp s.	corporation's	tion submits this statement for the p s board of directors. I hereby accep	urpose of o	hanging its intment as	s registered registered
SIGNATURE										
	Signature, typed or printed name of register		(NOTE Registe		ent signature	required wi	hen reinstating) ADDITIONS/CHANGES TO OFFIC	DATE EDG AND I	DIBECTOR	S IN 12
12.	PD	S AND DIRECTORS L DI		TITLE		Pras	sident/Director		Change	Addition
NAME	CORDY, IRENE		i	NAME			ry Wren	_		_
STREET ADDRESS	7201 RIDGEWOOD AVE	#12			T ADDRESS		Woodland Hills Driv	Ð		
CITY-ST-ZIP	CAPE CANAVERAL FL			CITY-			marck, IL 61814			
TITLE				TITLE	<u> </u>	525.	☐ Ch			Addition
NAME	MAKEPEACE, CONNIE M		2.2	NAME		İ				
STREET ADDRESS	625 WOODBRIDGE ROAL		2.3	STREE	T ADDRESS					
CITY-ST-ZIP	MELBOURNE FL 32920		2. 4	CITY-	ST-ZIP					
TITLE	SD	D	ELETE 3.1	TITLE					Change	Addition
NAME	MERRIGAN, MARGUERIT	E D	3.2	NAME						
STREET ADDRESS	7201 RIDGEWOOD AVE	#24	3.3	STREE	T ADDRESS					
CITY-ST-ZIP	CAPE CANAVERAL FL		3.4	CITY-	ST-ZIP					
TITLE	V D		ELETE 4.1	TITLE	·			[Change	Addition
NAME	LUNKENHEIMER, VICKI		4.3	NAME						
STREET ADDRESS	7201 RIDGEWOOD AVE.	#14	4.3	STREE	T ADDRESS					
CITY-ST-ZIP	CAPE CANAVERAL FL 3			CITY-	ST-ZIP				7.0	A 1 1000
TITLE		□ D	1	TITLE				Ł	Change	Addition
NAME				NAME						
STREET ADDRESS					T ADDRESS					
CITY - ST - ZIP				CITY-	ST - ZIP	ļ			10	(420)
TITLE				TITLE				L	Change	Addition
NAME				NAME						
STREET ADDRESS			6.3	STREE	T ADDRESS					

14. I do 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.

SIGNATURE: Marqueste Wille

FILED

Feb 27 1997 8:00am

Secretary of State

E CAMPIA ENGAL METER CIRIL MEREL ERMAN DICA RIGIO DENDI MARIE ALREI RIBEN ATOLI FRAI

FEB - 21, 1997 407 - 783 - 1240

Date Daytime Priorie # 0018920