2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT **DOCUMENT #752843** 1. Entity Name DOLPHIN REEF CONDOMINIUM ASSOCIATION, INC. Principal Place of Business Mailing Address

2504 GULF BLVD

3. Mailing Address

City & State

Suite, Apt. #, etc.

"INDIAN ROCKS BEACH" FL" 33785" "US" "" ~"

Country

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept

FILED Jan 24, 2005 8:00 am Secretary of State

01-24-2005 90028 045 ****61.25



HELEN LUDLOW 2504 GULF BLVD. #401

INDIAN ROCKS BCH., FL 33785

the obligations of registered agent.

Country

6. Name and Address of Current Registered Agent

2504 GULF BLVD

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Zio

INDIAN ROCKS BEACH, FL²² 33785 12 US 12

Street Address (P.O. Box Number is Not Acceptable)

5. Certificate of Status Desired

7. Name and Address of New Registered Agent

Zip Code

Fee Required

SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) Filing Fee is \$61.25 9. Election Campaign Financing Make check payable to \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2005 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. SD TITLE ☐ Delete TITLE TREUTEL, NORBERT NAME NAME STREET ADDRESS STREET ADDRESS 2504 GULF BLVD 508 INDIAN ROCKS BEACH, FL 33785 CITY-ST-ZIP CITY-ST-ZIP VD TITLE ☐ Delete TITLE Change Addition SPILKO, PAUL NAME NAME 2504 GULF BLVD # 104 STREET ADDRESS STREET ADDRESS INDIAN ROCKS BEACH, FL. 33785 CITY-ST-ZIP CITY-ST-7IP ☐ Delete TITLE ☐ Change ☐ Addition TITLE OTT, JOHN NAME NAME 2504 GULF BLVD STREET ADDRESS STREET ADDRESS INDIAN ROCKS BCH., FL CITY-ST-ZIP CITY-ST-ZIP ☐ Delete TITLE Change ☐ Addition TITLE ARISTO, GIORGIO NAME 2504 GULF BLVD #406 STREET ADDRESS STREET ADDRESS INDIAN ROCKS BEACH, FL 33785 CITY-ST-ZIP CITY-ST-ZIP Change ☐ Addition ☐ Delete TITLE TITLE HARRIS, ROBERT NAME NAME 1. 1.16 2504 GULF BLVD STREET ADDRESS STREET ADDRESS CITY-ST-ZIP INDIAN ROCKS BCH, FL CITY-ST-ZIP 🔀 Delete ROSLYN PANTHER TITLE HELEN, LUDLOW NAME 2504 GULF BLVd 303 2504 GULF BLVD 507 STREET ADDRESS STREET ADDRESS IndiAH ROCKS BEACH INDIAN ROCKS BEACH, FL 33785 CITY-ST-ZIP CITY-ST-ZIP

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Vohn C. OTT Ve

Daytime Phone #