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Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 754905 (8)
1. Corporation Name
LEMON BAY BREEZES CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business Mailing Address
1401 S. MCCALL RD., #107B ENGLEWOOD FL 34223
1401 S. MCCALL RD., #107B ENGLEWOOD FL 34223-4858

3. Date Incorporated or Qualified 10/30/1980
3a. Date of Last Report 04/25/1996

2. Principal Place of Business 2a. Mailing Address 4. FEI Number 59-2728446 Applied For Not Applicable
21 Suite, Apt #, etc. 26 Suite, Apt #, etc.
22 City & State 27 City & State 5. Certificate of Status Desired [] \$8.75 Additional Fee Required
23 Zip Country 28 Zip Country 6. Election Campaign Financing Trust Fund Contribution [] \$5.00 May Be Added to Fees
24 25 29 30 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes [] Yes [] No

9. Name and Address of Current Registered Agent
STENGER, JOHN
1401 S. MCCALL RD., #303
ENGLEWOOD FL 34223
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VD STENGER, JOHN 1401 S. MCCALL ROAD ENGLEWOOD FL	1.1 TITLE	
NAME		1.2 NAME	
STREET ADDRESS		1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	PD SULLIVAN, RICHARD E. 1401 MCCALL RD ENGLEWOOD FL	2.1 TITLE	
NAME		2.2 NAME	
STREET ADDRESS		2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	D WILLIAM, GRADY JR 1401 S. MCCALL RD. ENGLEWOOD FL	3.1 TITLE	D.
NAME		3.2 NAME	BASTIAN PAASSE
STREET ADDRESS		3.3 STREET ADDRESS	1401 S. MCCALL ROAD
CITY-ST-ZIP		3.4 CITY-ST-ZIP	ENGLEWOOD, FL.
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 hereon, or on an attachment thereto.

SIGNATURE: *Richard E. Sullivan* 3/31/97 941-474-3478
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0002366

CR2E037 (9/96)