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Feb 04 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 756593 (0)
1. Corporation Name
SPANISH CAY VILLAS CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business Mailing Address
C/O A. KARIM KHUDAIRI
1204-D. SPANISH CAY LANE
PUNTA GORDA FL 33950
C/O A. KARIM KHUDAIRI
1204-D. SPANISH CAY LANE
PUNTA GORDA FL 33950-5835

3. Date Incorporated or Qualified 03/03/1981
3a. Date of Last Report 02/01/1996
4. FEI Number 59-2181832
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
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

WOITZKY, FRANK
201 W MARION AVENUE
SUITE 301
PUNTA GORDA FL 33950

81 Name Wotitzky, Edward
82 Street Address (P.O. Box Number is Not Acceptable) 223 Taylor Street
83
84 City Punta Gorda FL 85 Zip Code 33950

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]* (NOTE: Registered Agent signature required when reinstating) DATE 1/28/97

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KHUDAIRI, A KARIM	1.2 NAME	
STREET ADDRESS	600 WASHINGTON ST #1	1.3 STREET ADDRESS	
CITY-ST-ZIP	WELLESLEY MASS	1.4 CITY-ST-ZIP	
TITLE	SD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KHUDAIRI, SAJIDA Y	2.2 NAME	
STREET ADDRESS	600 WASHINGTON ST #1	2.3 STREET ADDRESS	
CITY-ST-ZIP	WELLESLEY MASS	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	KHUDAIRI, NABEEL	3.2 NAME	
STREET ADDRESS	600 WASHINGTON ST #1	3.3 STREET ADDRESS	
CITY-ST-ZIP	WELLESLEY MA	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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 if changed, or on an attachment with an address.

SIGNATURE: A. KARIM KHUDAIRI *[Signature]* 1/6/97

CR2E037 (9/96)