## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Mar 04 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

Principal Place of Business

SIGNATURE:

759125

(8)

Mailing Address

## COURTYARD SQUARE CONDOMINIUM ASSOCAITION, INC.

4301 32ND ST W - <del>E.14</del> Bradenton Fl 34206 US		2901 29TH AVE W. Bradenton Fl. 34205-3774		i i	
				3. Date Incorporated or Qualified 07/13/1981	3a. Date of Last Report 02/26/1996
Principal Place of Business     2		2a. Mailing Address		4. FEI Number	Applied For
21		26		59-2100563	Not Applicable
Suite, Apt #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	S8.75 Additional Fee Required
City & State	9	City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	<ol><li>This corporation has liability for</li></ol>	
24	25		30		Yes No
	9. Name and Address of Curr	ent Registered Agent	961 33	10. Name and Address of New Re	glatered Agent
			81 Name	•	
C&S CONDO MGMNT SERV INC			82 Street	Address (P.O. Box Number is Not Acceptate	)le)
4301 32ND ST W					
<del>- E-14</del>			83 C	!7	
BRADEN	NTON FL 34205		84 City		85 Zip Code
					FL   T
office or r agent. I a	to the provisions of Soctions 617.0 egistered agent, or both, in the Stammatham with, and accept the oblined the control of th	502 and 617.1508, Florida Statutes ite of Florida. Such change was au igations of, Section 617.0503, Flori	s, the above-named thorized by the cor ida Statutes.	d corporation submits this statement for the proporation's board of directors. I hereby accept	ourpose of changing its registered of the appointment as registered
SIGNATURE _	Signature, typed or printed name of legistered	agent and title if applicable. (NOTE:	Registered Agent signatur	re required when reinstating)	DATE
12.	OFFICERS A	AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12
TIBLE	Р	☐ DELET€	1.1 TITLE		Change Addition
NAME	Albright, Audrey		1.2 NAME		•
STREET ADDRESS	2901 29TH AVE W.		1.3 STREET ADDRESS		
CITY-ST-ZIP	BRANDENTON FL		1.4 CITY-ST-ZIP		
TITLE	VD .	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	Lewis, Helen		2.2 NAME		
STREET ADDRESS	2901 29TH AVE W.		2.3 STREET ADDRESS	1	
CITY - ST - ZIP	BRANDENTON FL		2. 4 CiTY-ST-ZiP		
TITLE	7	DELETE	3.1 TITLE		Change Addition
NAME	SEWALL, GEORGE		3.2 NAME		
STREET ADDRESS	2901 29TH AVE W		3.3 STREET ADDRESS		
CITY-S1-ZIP	BRADENTON FL		3.4. CITY-ST-ZIP		
TITLE	S	DELETE	4.1 TITLE	S	Change Addition
NAME	- NEWMAN, CINDY		4. 2 NAME	Linda Rikke	• •
STREET ADDRESS	-2013-20TH-AE-W		4.3 STREET ADDRESS		
CITY - ST - ZIP	-BRADENTON FL-		4.4 CiTY-ST-ZiP	Bradenton Fl 34205	
TOLE	D	☐ DELETE	5.1 TITLE	DIGUELLON IN JUZOS	Change Addition
NAME	EVANS, WILLIAM		5.2 NAME		
STREET ADDRESS	2912 29TH AE W		5.3 STREET ADDRESS		
CITY-ST-ZIP	BRADENTON FL		5.4 CITY - ST - ZIP		
TITLE		DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		<u> </u>
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		
14. I do herel	by certify that the information supp	lied with this filing does not qualify	for the exemption	stated in Section 119.07(3)(i), Florida Statute	s. I further certify that the
I am an o	flicer or director of the corporation	or supplemental annual report is tru or the receiver or trustee empower , or on an attachment with an addre	red to execute this	d that my signature shall have the same legareport as required by Chapter 617, Florida S	il effect as if made under oath; that statutes; and that my name

and the Beomer