2006 NOT-FOR-PROFIT CORPORATION **ANNUAL REPORT**

DOCUMENT #759505

1. Entity Name



THE APOLLO BEACH CONDOMINIUM ASSOCIATION. Principal Place of Business Mailing Address 40042200 1025 APOLLO BEACH BLVD PO BOX 3612 APOLLO BEACH, FL 33572 US STE 3 APOLLO BCH, FL 33572-2043 US 2. Principal Place of Business 3. Mailing Address Suite, Apt. #, etc. Suite, Apt. #, etc. 01152006 Chg-NP CR2E037 (11/05) City & State City & State 4. FEI Number NOT APPLICABLE Applied For Not Applicable Zip Country Zip Country \$8.75 Additional 5. Certificate of Status Desired Fee Required 6. Name and Address of Current Registered Agent 7. Name and Address of New Registered Agent MANDELL, ROBERT W 1033-1 APOLLO BEACH BLVD. Street Address (P.O. Box Number is Not Acceptable) APOLLO BEACH, FL 33572 Zip Code 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 the obligations of registered agent. SIGNATURE Signisture, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE 9. Election Campaign Financing Filing Fee is \$61.25 Make check payable to \$5.00 May Be Trust Fund Contribution. Florida Department of State Due by May 1, 2006 Added to Fees OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10 10. 11. Ŋ ☐ Delete TITLE TITLE U33 A polla Beach Blod Unit 2 KLYM, DAVID NAME NAME STREET ADDRESS 1721 E 28TH AVE STREET ADDRESS LAKE STATION, IN 46405 CITY-ST-ZIP CITY-ST-ZIP TITLE ☐ Delete TITLE SALTZER, MAXWELL NAME MAME 1721 E 28th Atte STREET ADDRESS 9212 RIVER COVE DR STREET ADDRESS RIVERVIEW, FL 33569 CITY-ST-ZIP CITY-ST-ZIP TITLE □ Delete TITLE WEEDON, RAY NAME NAME STREET ADDRESS 839 BRIDIE WAY STREET ADDRESS CITY-ST-7IP APOLLO BEACH, FL 33572 CITY-ST-ZIP SD Bern Rozett woods Dr TITLE ☐ Delete ■ Addition TITLE CHEWNING, MERRY F NAME NAME STREET ADDRESS 1033 APOLLO BEACH BLVD UNIT5 STREET ADDRESS RUSKIN, FL 33570 CITY-ST-ZIP APOLLO BEACH, FL 33572 CITY-ST-ZIP TITLE ☐ Delete TITLE ☐ Change ☐ Addition WhenGox NAME NAME STREET ADDRESS STREET ADDRESS CITY-ST-ZIP CITY-ST-ZIP Delete TITLE Change TITLE ☐ Addition NAME STREET ADDRESS STREET ADDRESS CITY-ST-78P CITY-ST-7IP

12. I hereby certify that the information supplied with this filling does not qualify for the exemptions contained in Chapter 119, 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 attacting my in an action of the corporation of the corpor

SIGNATURE:

FILED

Apr 03, 2006 8:00 am Secretary of State

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