

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Jun 01, 1999 8:00 am
Secretary of State

06-01-1999 90024 040 ****61.25

DOCUMENT # 759777

1. Corporation Name

TOWNHOMES OF INDIALANTIC BY-THE-SEA HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

DAVID RESTARICK
105 11TH AVENUE
INDIALANTIC FL 32903
US

Mailing Address

DAVID RESTARICK
105 11TH AVENUE
INDIALANTIC FL 32903
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 **TownHomes of Indialantic**

27 Suite, Apt. #, etc.

28 **INDIALANTIC FL**

29 Zip

Country

3. Date Incorporated or Qualified

08/25/1981

4. FEI Number

59-2518234

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

RESTARICK, DAVID
105 11TH AVENUE
INDIALANTIC FL 32903

10. Name and Address of New Registered Agent

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME GURINSKAS, VIOLET
STREET ADDRESS 1482 CHILEAN AVENUE
CITY-ST-ZIP WINTER PARK FL 32792 ☒ DELETE

TITLE STD
NAME RESTARICK, DAVID
STREET ADDRESS 105 11TH AVENUE
CITY-ST-ZIP INDIALANTIC FL 32903 ☒ DELETE

TITLE VD
NAME GURINSKAS, AL
STREET ADDRESS 1482 CHILEAN AVENUE
CITY-ST-ZIP WINTER PARK FL 32792 ☒ DELETE

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE PD ☒ Change ☐ Addition
1.2 NAME RESTARICK, DAVID
1.3 STREET ADDRESS 105 11TH AVENUE
1.4 CITY-ST-ZIP INDIALANTIC, FL 32903

2.1 TITLE VD ☒ Change ☐ Addition
2.2 NAME KJELLSTROM, ELVING
2.3 STREET ADDRESS 90 INDIAN RIVER REALTY - PERRY COLEMAN
2.4 CITY-ST-ZIP 1090 N. HWY. A1A
INDIALANTIC, FL 32903

3.1 TITLE STD ☒ Change ☐ Addition
3.2 NAME MCGEE, DOROTHY A.
3.3 STREET ADDRESS 109 11TH AVENUE
3.4 CITY-ST-ZIP INDIALANTIC, FL 32903

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. 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 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, with all other like empowered.

SIGNATURE:

Dorothy A. McGee
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/28/99
Date

407-724-1334
Daytime Phone #

CR2E037 (11/98)

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