FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

COLONIAL HOUSE CONDOMINIUMS ASSOCIATION, INC.

FILED Feb 24 1998 8:00am Secretary of State

Principal Place of Business Mailing Address										1 100111 10010 BINI 00110 QIRI 10018 QIII 01914 Q	DI BILL VILLE	IIIII VIVIL IBUE	
300 S. BANANA RIVER BLVD. #308 COCOA BCH FL 32931-3378 US					300 S. BANANA RIVER BLVD. #308 COCOA BCH FL 32931-0378				}	3. Date Incorporated or Qualified			
UŞ										4. FEI Number		pplied For	
	Principal Place	- (D		1 00	Mailing Address					59-2140705		ot Applicable	
21	Principal Place	OBUSIN	385		26					5. Certificate of Status Desired		Additional lequired	
Suite, Apt. #, etc.					Suite, Apt. #, etc.					6. Election Campaign Financing	\$5.00	***************************************	
22				27						Trust Fund Contribution	Added t		
23	City & State				City & State					7. Is this nonprofit corporation a homeowners association?			
231	Žip	ip Country						Country		8. This corporation owes or has paid the current year Intangible			
24	26			29	===				Personal Property Tax due June 30. 🙀 Yes 🔲 No				
	9). Name i	and Address of Curr	ent Regis	stered Agent		24	1		10. Name and Address of New Registered	Agent		
	***						61	Name					
GAILEY, BETTY C 300 S BANANA RIVER BLVD #304							82	Street	Addres	s (P.O. Box Number is Not Acceptable)			
COCOA BCH FL 32931							В3						
							84	City			85 Zip	Code	
- 24	Discussification	D. Droviole	on of Sections 617.0	EDO and E	117 1500 Florida Ptol	utaa tha al				ration submits this statement for the purpose	e	lto engistered	
* **	office or regis	stered age	ent, or both, in the Sta	de of Flori	da. Such change was	authorized	d by	the cor	poration	n's board of directors. I hereby accept the ap	pointment as	registered	
۸.,		amiliar with	n, and accept the obt		i, Section 617.0503, i	riorida Stat	uies	S.		2/19/9	5		
SIL	SNATURE Sign	ature, typod o	x printed name of registered	apont and title		OTE Registered	i Age	ent signature	required	when reinstating) DATE			
12.			OFFICERS A	NO DIRE		13.				ADDITIONS/CHANGES TO OFFICERS AN			
TITL		PD PETER			☐ DELETE			1.1 TITLE			☐ Change	Addition	
	NAME GAILEY, BETTY STREET ADDRESS 300 S BANANA RVR BLVD #3				i i			1.2 NAME					
	STREET ADDRESS 300 S BANANA RVR BLVD #3 CITY-ST-ZIP COCOA BEACH, FL 32931							1.3 STREET ADDRESS 1.4 CITY - ST - ZIP					
TITE		VSD	DENOIT, 1 E 32831		DELETE	2.1 TI		11- ZIF	VS	<u> </u>	Y Change	Addition	
NAI		MOORE, RICHARD R								NELLI, JOHN			
STR	EET ADDRESS 3		2.3 STREET ADDRESS			300 S.BANANA RIVER BLVD #203							
CIT	Y-SY-ZIP C	COCOAI	BCH FL	_,, · · · · · · · · · · · · · · · · · ·		2.40	11Y-5	ST-ZIP		COA BEACH, FL 32931			
TITE	1 1	VTD			DELETE	3111			VT	D	Change	☐ Addition	
NAJ	I .		EAU, ROBERT A			3 2 N/				TERSTRADT, EDWARD			
		300 S BA	INANA RIVER BLVI	J #105				ADDRESS		O S.BANANA RIVER BLV	D. #2	U 5	
TITL		UUUUA I	DOTI FL		☐ DELETE	3.4. U 4.1 TD		ST-ZIP	_co	COA BEACH, FL 32931	Change	☐ AddItion	
NAI						4.2 N							
	EET ADDRESS					1		ADDRESS	1				
	Y-ST-ZIP					•		ST-ZIP					
TIT					☐ DELETE	5.1 Tr	TLE				Change	Addition	
NA	AE					5.2 N/	ME						
	EET ADDRESS					1		ADDRESS					
	Y-ST-ZIP				I DELETE	5.4 CI	_	T-ZIP	ļ		Change	☐ Addition	
TITL	· I				וון טנונונ	6.1 TI					CI Change	MODIDON	
NAI	AE					62 N/]				

14. I hereby certify that the information supplied with this filing does not quality 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.

407-783-1231