

FILE NOW: FILING FEE IS \$61.25

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Apr 16, 1999 8:00 am
Secretary of State

04-16-1999 90067 019 ****61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # 761285					
1. Corporation Name S.L. CONDOMINIUM ASSOCIATION III, INC.					
Principal Place of Business 622 SPG LAKES BLVD. BRADENTON FL 34210 US			Mailing Address 622 SPG LAKES BLVD. BRADENTON FL 34210 US		



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26	MA-CON, INC	12/30/1981	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27	200 S. WASHINGTON BLVD #4	59-2254691	
City & State		City & State		5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
23		28	SARASOTA FL	6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees	
Zip Country		Zip Country			
24		29	34236	30	SARASOTA

9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
CONNER, ROBERT C 622 SPRING LAKES BLVD BRADENTON FL 34210				81	Name		
				82	Street Address (P.O. Box Number is Not Acceptable)		
				83			
				84	City	State	Zip Code
					SARASOTA	FL	34236

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 Warren Weil **WARREN WEIL** DATE 3/18/99

Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS				13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	PTD	☒ DELETE		1.1 TITLE	PD	☒ Change ☒ Addition	
NAME	CONNER, ROBERT C			1.2 NAME	NEMES, CAROL		
STREET ADDRESS	622 SPG LAKES BLVD.			1.3 STREET ADDRESS	624 SPRING LAKE BLVD		
CITY-ST-ZIP	BRADENTON FL			1.4 CITY-ST-ZIP	BRADENTON, FL 34210		
TITLE	VD	☐ DELETE		2.1 TITLE	D	☒ Change ☐ Addition	
NAME	HINE, MEL			2.2 NAME			
STREET ADDRESS	626 SPRING LAKES BLVD.			2.3 STREET ADDRESS			
CITY-ST-ZIP	BRADENTON, FL 00000			2.4 CITY-ST-ZIP			
TITLE	SD	☐ DELETE		3.1 TITLE	VP/D	☒ Change ☐ Addition	
NAME	FEDROFF, MICHAEL			3.2 NAME			
STREET ADDRESS	620 SPRINGS LAKES BLVD			3.3 STREET ADDRESS			
CITY-ST-ZIP	BRADENTON FL			3.4 CITY-ST-ZIP			
TITLE	D	☐ DELETE		4.1 TITLE	T/D	☒ Change ☐ Addition	
NAME	WAYNE, LEONARD			4.2 NAME			
STREET ADDRESS	609 SPRING LAKES BLVD			4.3 STREET ADDRESS			
CITY-ST-ZIP	BRADENTON FL			4.4 CITY-ST-ZIP			
TITLE	D	☒ DELETE		5.1 TITLE	S/D	☐ Change ☒ Addition	
NAME	NEMES, CAROL B			5.2 NAME	HARRISON, ETHEL		
STREET ADDRESS	624 SPRING LAKES BLVD			5.3 STREET ADDRESS	612 SPRING LAKE BLVD		
CITY-ST-ZIP	BRADENTON FL			5.4 CITY-ST-ZIP	BRADENTON, FL, 34210		
TITLE		☐ DELETE		6.1 TITLE		☐ Change ☐ Addition	
NAME				6.2 NAME			
STREET ADDRESS				6.3 STREET ADDRESS			
CITY-ST-ZIP				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: Carole Nemes **SIGNATURE REQUIRED** DATE 3/18/99 (QA) 739-1204

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Daytime Phone #