

FILE NOW: FILING FEE IS \$61.25

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Jun 12 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **761307** (8)

1. Corporation Name

CORAL BAYVIEW II CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business	Mailing Address
CORAL BAYVIEW II 1512 W. CAPE CORAL PKWY., #106 CAPE CORAL FL 33914	CORAL BAYVIEW II 1512 W. CAPE CORAL PKWY., #106 CAPE CORAL FL 33914

3. Date Incorporated or Qualified	12/29/1981
4. FEI Number	59-2251268
Applied For	Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

5. Certificate of Status Desired	☐ \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution	☐ \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association?	☒ Yes ☐ No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	☐ Yes ☐ No

9. Name and Address of Current Registered Agent	
SIDERAVAGE, PATRICIA 1512 CAPE CORAL PKWY., #105 CAPE CORAL FL 33914	

10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	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 <i>Patricia Sideravage</i>	DATE 4-27-98

12. OFFICERS AND DIRECTORS	
TITLE	☐ DELETE
NAME	PD CLARK, RAYMOND
STREET ADDRESS	1512 W. CAPE CORAL PKWY., #106
CITY-ST-ZIP	CAPE CORAL FL 33914
TITLE	☒ DELETE
NAME	STD BECKMAN, PATRICIA
STREET ADDRESS	3748 SW 1ST PLACE
CITY-ST-ZIP	CAPE CORAL FL 33914
TITLE	☒ DELETE
NAME	VD PALUMBO, ANTHONY
STREET ADDRESS	1512 W. CAPE CORAL PKWY., #105
CITY-ST-ZIP	CAPE CORAL FL 33914
TITLE	☒ DELETE
NAME	VPD KLUTER, JAMES SR
STREET ADDRESS	6359 BRECKSVILLE RD.
CITY-ST-ZIP	INDEPENDENCE OH 44131
TITLE	☐ DELETE
NAME	TD SIDERAVAGE, PATRICIA
STREET ADDRESS	1512 W. CAPE CORAL PKWY., #105
CITY-ST-ZIP	CAPE CORAL FL 33914
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	PRESIDENT - D
1.3 STREET ADDRESS	CLARK, RAYMOND
1.4 CITY-ST-ZIP	1512 W. CAPE CORAL PKWY #106
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☐ Change ☒ Addition
4.2 NAME	VICE PRESIDENT - D
4.3 STREET ADDRESS	JAMES, CAHILL
4.4 CITY-ST-ZIP	1625 S.E. 47TH ST
5.1 TITLE	☒ Change ☐ Addition
5.2 NAME	SECRETARY/TREASURER - D
5.3 STREET ADDRESS	SIDERAVAGE, Patricia
5.4 CITY-ST-ZIP	1512 CAPE CORAL PKWY., #105
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.	
SIGNATURE <i>Patricia Sideravage</i>	DATE 4-27-98

CR2E037 (10/97)

Dep. \$61.25

941-542-7605