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NONPROFIT CORPORATION ANNUAL REPORT

1997

FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

762670

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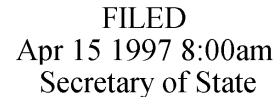
CONDOMINIUM ON THE BAY MANAGEMENT CORPORATION, I NC.

888 BOULEVARD OF THE ARTS SARASOTA FL 34236

Principal Place of Business

Mailing Address

888 BOULEVARD OF THE ARTS SARASOTA FL 34236-4871





							3. Date Incorporated or Qualified 03/30/1982	3a. Date	of Last F 4/17/19	leport <b>996</b>		
2. Principal P	lace of Business	2a, Mailing Address					4. FEI Number	1	Applied For			
21		26					59-2181548			ot Applicable		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired			Additional		
22		27					5. Commedie of dialog Desired		Fee R	beriupe		
City & Stat	e	City & State	<del></del> 1				6. Election Campaign Financing \$5.00 May Be					
23	28						Trust Fund Contribution			to Fees		
Zip	Country	Zip	Cor			8. This corporation has liability for i			. 199.032,			
24 25 29 30  9. Name and Address of Current Registered Agent					Florida Statutes Yes No  10. Name and Address of New Registered Agent							
e, Hallie and Address of Carteria regretation Agent						81 Name						
LAMESTAS	A A LANGEO											
WILLIAM J. LANGER 888 BLVD OF THE ARTS					82 Street Address (P.O. Box Number is Not Acceptable)							
SARASOTA FL 34236												
SANASUIA FL 34230												
				84	City			FL	<b>85</b> Zip	Code		
11. Pursuant	to the provisions of Sections 617.0502	2 and 617,1508. Florida Statut	es, the a	L L bove	o-named	corpo	ration submits this statement for the p	urpose of c	hanging i	ts 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 agen	t and tile if applicable (NO1)	E: Registero	d Ago	nt signature	required	when roinstating)	DATE				
12.	OFFICERS AND		13.				ADDITIONS/CHANGES TO OFFIC	ERS AND D	IRECTOR	RS IN 12		
TITLE	D	DELETE	1.1 1111			VP	/D	Ż	Change	Addition		
NAME			1.2 N	1.2 NAME								
STREET ADDRESS	888 BLVD OF THE ARTS	LVD OF THE ARTS		1.3 STREET ADDRESS						J		
CITY-ST-ZIP	SARASOTA FL		1.4 CI	ITY-SI	1-7IP							
TITLE	VD .	X DELETE	2.1 7111.6		l	D			] Change	X Addition		
NAME			2.2 N	2.2 NAME		W.	Wyatt Walker					
STREET ADDRESS .			2.3 S	2.3 STREET ADDRESS 8		88	88 Blvd of the Arts					
CITY-ST-ZIP				2.4 CITY-ST-ZIP Se			rasota, FL 34236					
TITLE	SD X DÉLETÉ		3.1 7(					L	Change	X Addition		
NAME	GILLIS, C. NORMAN						y Beauchene			-		
STREET ADDRESS				3.3 STREE 1 ADDRES			8 Blvd of the Arts					
CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·					Sa	rasota, <u>FL 34236</u>		1 86			
TITLE	,,,		•	4.1 TITLE				L	] Change	Addition		
NAME	SCHEFFERT, RALPH E.		4. 2 N									
STREET ADDRESS	888 BLVD. OF THE ARTS	AAATA M			ADDRESS					1		
CITY-ST-ZIP	SARASOTA FL	X DELETE	_	1Y-\$1	I - ZIP				Change	L. Relatition		
TITLE	PD CEIGEN MILT	[V] pertie	5.1 111			PD		L	1 rouange	X Addition		
NAME CTOTET ADDDGGG	FELSEN, MILT 888 BLVD. OF THE ARTS		5.2 NA		ADDDE 64		bert Howell					
STREET ADDRESS	SARASOTA FL				ADDRESS		8 Blvd of the Arts					
CITY-ST-ZIP	SANASOIA FL	DELETE	5.4 CI 6.1 TI	TY-ST	1 - ZIP	_Sa	Sarasota, Fl 34236			Addition		
NAME		L. Dettile	•					_	7 Anguiñe	L.J Addition		
STREET ADDRESS			6.2 NAME 63 STREET		VODDICO							
	•											
City-St-ZiP 14. I do heret	by certify true tine information supplied	with this filing does not qualif	64 Cl			ated in	Section 119.07(3)(i). Florida Statutes	s. I further o	ertify that	the		

. I do hereby certify true 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 offect 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 inchanged, or on an attachment with an address.

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