FILE NOW: FILING FEE AFTER MAY 1 IS $55.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB -1 PM 1:38

DOCUMENT # 765978 (2)

1. Corporation Name

BY-THE-SEA CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
2611 GULF DRIVE SANIBEL FL 33957	2611 GULF DRIVE SANIBEL FL 33957

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 12/03/1982
3a. Date of Last Report: 03/04/1994
4. FEI Number: 59-2241119 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business (21)	2a. Mailing Address (26)
Suite, Apt. #, etc. (22)	Suite, Apt. #, etc. (27)
City & State (23)	City & State (28)
Zip (24) / Country (25)	Zip (29) / Country (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. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ — **$68.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

GELBERG, ANDREW L
1105 SANDCASTLE RD
SANIBEL FL 33957

10. Name and Address of New Registered Agent

1 Name
2 Street Address (P.O. Box Number is Not Acceptable)
3
4 City — FL — 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE
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	SD	1.1 ☐ Change ☐ Addition
NAME	ACUFF, DEE	1.2
STREET ADDRESS	2511 E MILTON THOMPSON RD	1.3
CITY-ST-ZIP	LEES SUMMIT MO	1.4
TITLE	TD	2.1 ☐ Change ☐ Addition
NAME	SMITH, BETTY	2.2
STREET ADDRESS	6633 PARKWOOD RD	2.3
CITY-ST-ZIP	EDINA MI	2.4
TITLE	AS	3.1 ☐ Change ☐ Addition
NAME	GELBERG, ANDREW	3.2
STREET ADDRESS	1105 SANDCASTLE RD	3.3
CITY-ST-ZIP	SANIBEL FL	3.4
TITLE	VD	4.1 ☐ Change ☐ Addition
NAME	GOLDENBERG, JUDY	4.2
STREET ADDRESS	4925 W. COVENTRY ROAD	4.3
CITY-ST-ZIP	MINNETONKA MN	4.4
TITLE		5.1 ☐ Change ☐ Addition
NAME		5.2
STREET ADDRESS		5.3
CITY-ST-ZIP		5.4
TITLE		6.1 ☐ Change ☐ Addition
NAME		6.2
STREET ADDRESS		6.3
CITY-ST-ZIP		6.4

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 added by an attachment with an asterisk.

SIGNATURE: Andrew L. Gelberg 1/25/95 813-472-1439
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR AGENT — Date — Daytime Phone #

Andrew L. Gelberg

0017418