FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION



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

| ANNUAL REPU | |
|-------------|--|
| 1996 | |

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

765978

(2)

DOCUMENT # BY-THE-SEA CONDOMINIUM ASSOCIATION INC

| | | ooganon, mo. | | | | | | |
|---|---|--|---|---------------------------------------|--|---|--|---|
| Principal Place of Business Mailing Address | | | | | - 1 (O DIỆT LOUIS DINGS DI | | JEL BIBLE BIBLE | OLDIN OKON IDAK |
| 2611 GULF D SANIBEL FL | | 2611 GULF DRIVE SANIBEL FL 33957 | | | | | | |
| 6 D: : : : : : : : : : : : : : : : : : : | | | | | 3. Date incorporated or 12/03/1982 | | ate of Last 02/01/1 | |
| 21 | lace of Business | 2a. Mailing Address 26 2446 PA | LM 1 | RIDGE | 4. FEI Number 59-2241119 | | - + | Applied For Not Applicable |
| Suite, Apt. | | Suite, Apt. #, etc. 27 C/o /SLANT | FIN | ANCIAL | 5. Certificate of Status D | esired | | Additional Required |
| City & State 23 Zip | | City & State 5 AN 13: | | PL | 6. Election Campaign Fir Trust Fund Contribution | ~ [.7 | | O May Be d to Fees |
| 24 ZIP | Country 25 9. Name and Address of Curre | 29 33957 | 30 | intry | This corporation has li Florida Statutes | ☐ Yes ☐ | No No | 199.032, |
| | 5. Name and Address of Curre | nt Registered Agent | | 81 Name _ | 10. Name and Address | of New Registered | Agent | |
| GEI REDA | G ANDDEW I | | | · · · · · · · · · · · · · · · · · · · | PAULO A OWE | NS | | |
| | g, andrew l Indcastle RD | | | 82 Street Add | Iress (P.O. Box Number is Not | Acceptable) | | |
| | . FL 33957 | | | 83 Z. | 440 PALM R | IDGE ROA | 7 <i>0</i> | |
| ONHIDEL | . F C 33837 | | | 63 | | | | |
| | | | | B4 City | ANIBEL | · | 85 Zg | o Code |
| 11. Pursuant t | to the paysons of Sections 617 050 | 2 and 617 1509. Florida Statute | n the ebe | >6 | イルリラとし | FL | | 24/~7 |
| or register | to the provisions of Sections 617.050; ed agent, or both, in the State of Flor th, and accept the objigations of, Sec | ida. Such change was authorize | ed by the c | corporation's boa | aration submits this statement that of directors. I hereby acception | or the purpose of cha t the appointment as | inging its r registered | egistered office : agent, I am |
| SIGNATURE | un, and accept the objections or, Sec | tion 617,0503, Florida Statutes. | • | | , | 3/1/01 | . 3 | |
| | Signature, typed or printed name of registered agen | it and title if applicable. (NO | TE: Registered | Agent signature require | ed when reinstatinot | 7/1/7 G DATE | | |
| 12. | OFFICERS AN | ID DIRECTORS | 13. | | ADDITIONS/CHANGES | | DIRECTO | RS IN 12 |
| TITLE | SD | DELETE | 1.1 TI | TLE | | | Change | Addition |
| NAME | ACUFF, DEE | | 1.2 NA | ME | | | _ | _ |
| STREET ADDRESS | 2511 E MILTON THOMPSON | RD | 1.3 ST | REET ADDRESS | | | | |
| CITY-ST-ZIP | LEES SUMMIT MO | | 1.4 00 | TY-ST-ZIP | | | | |
| TITLE | TD CMITH DETTY | DELETE | 2.1 11 | LE | | | Change | ☐ Addition |
| NAME | SMITH, BETTY 6633 PARKWOOD RD | | 2.2 NA | | | | | |
| STREET ADDRESS | EDINA MI | | | REET ADDRESS | 4000 | | | |
| CITY-ST-ZIP TITLÉ | AS | - Oriette | | TY-ST-ZIP | 40000 | 17356° 0106301 | <u> 54 </u> | |
| NAME | GELBERG, ANDREW | DELETE | 31 Tit | | ***61.25 | | | Addition Addition |
| STREET ADDRESS | 1105 SANDCASTLE RD | | 3.2 NA | · · | ホホホり1。ど り | | 3 }- | |
| CITY-ST-ZIP | SANIBEL FL | | | REET ADDRESS | | | | |
| TITLE | VD | DELETE | 3.4. CI | TY-ST-ZIP | | | 1 Cheeses | F14299 |
| NAME | GOLDENBERG, JUDY | ₩ | 4.1 MI 4. 2 NA | | | L | Change | ☐ Addition |
| STREET ADDRESS | 4925 W. COVENTRY ROAD | | | REET ADDRESS | | | | |
| CITY-ST-ZIP | MINNETONKA MN | | | Y-ST-ZIP | | | | |
| TITLE | | DELETE | 5.1 TIT | | TAILLY CANADO | г | 7 Change | Addition |
| NAME | | | 5.2 NA | I . | TOHN SCHORK DRESIDENT | | _ 0go | A vocation |
| STREET ADDRESS | | | | REET ADDRESS | PRESIDENT 751 DEED WAT | er DR | | |
| CITY - ST- ZIP | | | 5.4 CIT | Y-ST-ZIP | SXFOOD MARY | LAND 216 | 54 | |
| TITLE | | DELETE | 6.1 TIT | LE D | AVIDA OWENS | | Change | Addition |
| NAME | | | 6.2 NAI | ME A | SST TREASURY | | _ • | <u>, </u> |
| STREET ADDRESS | | | 6.3 STF | REET ADDRESS Z | SST TREASURY 440 PALM RIG ANGEL FC | DEE RO | | |
| CITY-ST-ZIP | | | 6.4 C(T | Y-ST-ZIP | ANIBEL FC | 33957 | | |
| certify that oath; that I appears in I | certify that the information supplied with the information indicates on this annuarm an officer or director of the corporations 12 or Block 12 if changed, or controls. | with this filing is voluntarily furnisual report or supplemental annu- ration or the requiver or trustee on an attachment with an addre | shed and d al report is empowere ss. | | | | ida Statute offect as if i s; and that | es. I further made under my name |

9 41 - 472 · 1439

Daytime Phone #