

FILE NOW: FILING FEE IS \$61.25

FILED  
Apr 13, 1999 8:00 am  
Secretary of State

04-13-1999 90078 018 \*\*\*\*61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 768428

1. Corporation Name

PROMENADE CONDOMINIUM OWNERS ASSOCIATION, INC.

Principal Place of Business

1211 GULF OF MEXICO DR.  
LONGBOAT KEY FL 34228

Mailing Address

1211 GULF OF MEXICO DR.  
LONGBOAT KEY FL 34228



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip 25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip 29 Country

3. Date Incorporated or Qualified

05/13/1983

4. FEI Number

31-1069500

Applied For  
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

\$5.00 May Be  
Added to Fees

9. Name and Address of Current Registered Agent

FASSLER, JOHN A., DR.  
1211 GULF OF MEXICO DRIVE UNIT #208  
~~P.O. BOX 49948~~  
LONGBOAT KEY FL 34228

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83 NO Post OFFICE BOX

84 City

FL

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

Dr. John A Fassler, President

*John Fassler*

4/5/99

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D  DELETE  
NAME KRAMAN, HYMAN MD  
STREET ADDRESS 1211 GULF OF MEXICO DR SUITE 306  
CITY-ST-ZIP LONGBOAT KEY FL 34228

1.1 TITLE Director  Change  Addition  
1.2 NAME Paul Grodner  
1.3 STREET ADDRESS 1211 Gulf of Mexico Drive, #203  
1.4 CITY-ST-ZIP Longboat Key, FL 34228

TITLE D  DELETE  
NAME COHEN, EUGENE D  
STREET ADDRESS 1211 GULF OF MEXICO DR, SUITE 510  
CITY-ST-ZIP LONGBOAT KEY FL

2.1 TITLE Secretary/Treasurer  Change  Addition  
2.2 NAME Doris Loevner  
2.3 STREET ADDRESS 1211 Gulf of Mexico Drive, #702  
2.4 CITY-ST-ZIP Longboat Key, FL 34228

TITLE D  DELETE  
NAME TROTTA, NANCY  
STREET ADDRESS 1211 GULF OF MEXICO DRIVE #801  
CITY-ST-ZIP LONGBOAT KEY FL

3.1 TITLE  Change  Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE PD  DELETE  
NAME FASSLER, JOHN A  
STREET ADDRESS 1211 GULF OF MEXICO DR  
CITY-ST-ZIP LONGBOAT KEY FL

4.1 TITLE  Change  Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE VP  DELETE  
NAME AUERBACH, ROBERT  
STREET ADDRESS 1211 GULF OF MEXICO DRIVE #401  
CITY-ST-ZIP LONGBOAT KEY FL

5.1 TITLE  Change  Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE D  DELETE  
NAME SAVAGE, MARVIN  
STREET ADDRESS 1211 GULF OF MEXICO DR SUITE 303  
CITY-ST-ZIP LONGBOAT KEY FL 34228

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, with all other like empowered.

SIGNATURE:

*John A. Fassler*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Dr. John A. Fassler, President

4/5/99

Date

Daytime Phone #

CR2E037 (11/98)