FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT 1995

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB -8 AM 9:42

DOCUMENT # 768969 (8)

1. Corporation Name
CONQUISTADOR BAY CLUB CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
C/O WAGNER PROP. MGT. P.O. BOX 10067 BRADENTON FL 34282	C/O WAGNER PROP. MGT. P.O. BOX 10067 BRADENTON FL 34282

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/16/1983
3a. Date of Last Report: 01/24/1994
4. FEI Number: 59-2484154 ☐ 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
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

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

9. Name and Address of Current Registered Agent

LA BARBERA, FRANK
4527 BAY CLUB DR
BRADENTON FL 34210

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 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	D	1.1 TITLE	☐ Change ☐ Addition
NAME	FLYNN, FRED	1.2 NAME	
STREET ADDRESS	4547 BAYCLUB DR	1.3 STREET ADDRESS	
CITY-ST-ZIP	BRADENTON FL	1.4 CITY-ST-ZIP	
TITLE	D	2.1 TITLE	☐ Change ☐ Addition
NAME	CRAWFORD, JOHN	2.2 NAME	
STREET ADDRESS	4541 BAYCLUB DR	2.3 STREET ADDRESS	
CITY-ST-ZIP	BRADENTON FL	2.4 CITY-ST-ZIP	
TITLE	D	3.1 TITLE	TREAS ☒ Change ☐ Addition
NAME	~~FINK, BETSY~~ Bob Seaman	3.2 NAME	Bob Seaman
STREET ADDRESS	~~4561 BAY CLUB DR~~	3.3 STREET ADDRESS	4455 Bay Club Dr
CITY-ST-ZIP	~~BRADENTON FL~~	3.4 CITY-ST-ZIP	
TITLE	PD	4.1 TITLE	SECY ☒ Change ☐ Addition
NAME	~~ADAMS, DON~~ Mary Malcolmian	4.2 NAME	Mary Malcolmian
STREET ADDRESS	~~4565 BAYCLUB DR~~	4.3 STREET ADDRESS	4553 Bay Club Dr
CITY-ST-ZIP	~~BRADENTON FL~~	4.4 CITY-ST-ZIP	Bradenton, Fl 34210
TITLE	D	5.1 TITLE	☐ Change ☐ Addition
NAME	FRANKLIN, WILLIAM	5.2 NAME	
STREET ADDRESS	4563 BAYCLUB DR	5.3 STREET ADDRESS	
CITY-ST-ZIP	BRADENTON FL	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 on an attachment with an address.

SIGNATURE: Robert L. Seaman 2/2/95 813 758 9624
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0016960