

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

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 34202~~

~~C/O WAGNER PROP. MGT.
P.O. BOX 10067
BRADENTON FL 34202~~

3. Date Incorporated or Qualified
06/16/1983

3a. Date of Last Report
02/08/1995

2. Principal Place of Business

2a. Mailing Address

21 **4301 32nd St W**

26 **PO Box 10674**

4. FEI Number
59-2484154

Applied For
Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 **Suite C-7**

27

5. Certificate of Status Desired ☐ **\$8.75 Additional Fee Required**

City & State

City & State

23 **Bradenton, Fl**

28 **Bradenton, Fl**

6. Election Campaign Financing Trust Fund Contribution ☐ **\$5.00 May Be Added to Fees**

Zip

Country

Zip

Country

24 **34205**

25 **Manatee**

29 **34282**

30 **Manatee**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

~~LA BARBERA, FRANK
4527 BAY CLUB DR
BRADENTON FL 34210~~

81 Name
82 **C&S Condominium Management Serv Inc**
83 **4301 32nd St W**
84 **Suite C-7**
85 **Bradenton FL 34205**

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

M.H. Chris Brown

M.H. Chris Brown

941-758-9454

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

(NOTE: Registered Agent signature required when appointing)

President

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D	☐ DELETE
NAME	FLYNN, FRED	
STREET ADDRESS	4547 BAYCLUB DR	
CITY-ST-ZIP	BRADENTON FL	
TITLE	D	☐ DELETE
NAME	CRAWFORD, JOHN	
STREET ADDRESS	4541 BAYCLUB DR	
CITY-ST-ZIP	BRADENTON FL	
TITLE	T	☐ DELETE
NAME	SEAMAN, BOB	
STREET ADDRESS	4455 BAY CLUB DR	
CITY-ST-ZIP	BRADENTON FL	
TITLE	S	☐ DELETE
NAME	MALOMIAN, MARY	
STREET ADDRESS	4553 BAY CLUB DR	
CITY-ST-ZIP	BRADENTON FL	
TITLE	D	☐ DELETE
NAME	FRANKLIN, WILLIAM	
STREET ADDRESS	4563 BAYCLUB DR	
CITY-ST-ZIP	BRADENTON FL	
TITLE		☐ DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	P/D ☒ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	VP/D ☒ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	S/D ☒ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	T/D ☒ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
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)(k), 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:

M.H. Chris Brown
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

941-758-9454

Date: Daytime Phone:

CR2E037 (12/95)