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**NONPROFIT** CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(8)

| CEDAR RUN CONDOMINIUM ASSOCIATION, INC.   |  |                                    |                                   |                                       | ····       |   |                   |                |                            |
|---|--|------------------------------------|-----------------------------------|---------------------------------------|------------|---|-------------------|----------------|----------------------------|
| Principal Place   | e of Business  | Mailing Address                    |                                   |                                       | - }        |   | 111 6611 91911 91 | .,             | 411 B1611 1001             |
| CEDAR RUN         5709 CORTEZ ROAD WEST           2734 49TH AVE W.         4835 27TH ST ₱105           BRADENTON FL 34207         BRADENTON FL 34210           US         US  |  |                                    |                                   |                                       |            | <ol> <li>Date Incorporated or Qualifie 04/23/1984</li> <li>FEI Number 59-2533636</li> </ol> | d                 | 1              | oplied For                 |
| 2. Principal P  | ace of Business  | 28. Mailing Address<br>26 702 60th | 2ª                                | C#                                    | c 1        | Certificate of Status Desired   |                   | \$8.75 A       | Additional                 |
| Sulte, Apt.   | # etc.   | Suite, Apt. #, etc.                |                                   | <u>VI.</u>                            |            | 6. Election Campaign Financing<br>Trust Fund Contribution                                   | <u> </u>          | \$5.00 N       | May Be                     |
| City & State 23 CP  | ioenton Fl   | City & State  28 OCOEN             | NA                                | F                                     |            | 7. Is this nonprofit corporation a  |                   |                |                            |
| 24 ZID  | 08 25 NANOPHEL   | 20 34308 30                        | Country                           | NA                                    | (FE        | 8. This corporation owes or has<br>Personal Property Tax due Ju                             |                   | rrent year Int | angible<br>J No            |
|   | 9. Name and Address of Current F                       | egistered Agent                    |                                   | <u>, 1</u>                            |            | 10. Name and Address of New   |                   |                | <b></b>                    |
|   |  |                                    | 81                                | Name                                  |            |   | .,                |                |                            |
| LAWRENCE, ESTHER D.<br>2734 49TH AVE., W.   |  |                                    |                                   | Street                                | Address    | (P.O. Box Number is Not Accep   | table)            | *              |                            |
| CEDAR RUN CONDO<br>BRADENTON FL 34207   |  |                                    | 83                                |                                       |            |   |                   |                |                            |
|   |  |                                    | 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 terminar with, and accept the obligations of, Section 617.0503, Florida Statutes. |  |                                    |                                   |                                       |            |   |                   |                | s registered<br>registered |
|   |  |                                    |                                   |                                       |            |   |                   |                |                            |
| SIGNATURE .   | Signature, typed or printed name of registered agent a | nd title if applicable. (NOTE: Re- | gistered Age                      | nt signature                          | required v | when reinstating)   | DATE              |                |                            |
| 12.   | OFFICERS AND D   |                                    | 13.                               |                                       |            | ADDITIONS/CHANGES TO OF   | FICERS AND        |                |                            |
| TITLE   | P  | ☐ DELETE                           | 1.1 TITLE                         |                                       | t-) (      | ک   |                   | ☐ Change       | Addition                   |
| NAME  | LAWRENCE, ESTHER D.                                    |                                    | 1.2 NAME                          |                                       |            |   |                   |                |                            |
| STREET ADDRESS  | 2734 49TH AVE., W., CEDAR RI                           | אנ                                 | 1.3 STREET                        | · · · · · · · · · · · · · · · · · · · |            |   |                   |                |                            |
| CITY-ST-ZIP   | BRADENTON FL   | DELETE                             | 1.4 CITY-S                        | r-ZIP                                 | <u> </u>   |   |                   | Change         | Addition                   |
| THILE   | D<br>Smith, Harold                                     | ☐ DECEIE                           | 2.1 TITLE                         |                                       |            |   |                   | Change         | Addition                   |
| NAME  | 2728 49TH AVE.   |                                    | 2.2 NAME                          | 4000000                               |            |   |                   |                |                            |
| STREET ADDRESS  | BRADENTON FL   |                                    | 2.3 STREET                        |                                       |            |   |                   |                |                            |
| CITY-ST-ZIP<br>TITLE  | A5   |                                    | 2. 4 C/TY - ST - Z/P<br>3.1 TITLE |                                       |            | <del></del>   |                   | Change         | Addition                   |
| NAME  | KNORPS, MARILYN  | _                                  | 3.2 NAME                          |                                       |            |   |                   | _ •            |                            |
| STREET ADDRESS  | 3545 OAK GROVE DR.                                     |                                    |                                   | ADDRESS                               |            |   |                   |                |                            |
| CITY-ST-ZIP   | SARASOTA FL  |                                    |                                   | T-ZIP                                 | ĺ          |   |                   |                |                            |
| TITLE   | D  | DELETE                             | 4.1 TITLE                         |                                       |            |   |                   | Change         | Addition                   |
| NAME  | HESS, BETTIE   |                                    | 4. 2 NAME                         |                                       |            |   |                   |                |                            |
| STREET ADDRESS  | 2720 49TH AVE., W.                                     |                                    | 4.3 STREET                        | address                               |            |   |                   |                |                            |
| CITY-ST-ZIP   | BRADENTON FL   |                                    | 4.4 CITY - ST                     | r- ZIP                                |            |   |                   |                |                            |
| TITLE   |  | DELETE                             | 5.1 TITLE                         |                                       |            |   |                   | Change         | ☐ Addition                 |
| NAME  |  | Į.                                 | 5.2 NAME                          | l                                     |            |   |                   |                |                            |
| STREET ADDRESS  |  |                                    | 5.3 STREET                        |                                       |            |   |                   |                |                            |
| CITY-ST-ZIP   |  | ☐ DELETE                           | 5.4 CITY-ST                       | - ZIP                                 | <u> </u>   |   |                   | Change         | Addition                   |
| TITLE   |  | TT DEFEIR                          | 6.1 TITLE                         | į                                     | )          |   |                   | ☐ cusuña       | ☐ Addition                 |
| NAME<br>PTREET ADDOCCO  | •  |                                    | 6.2 NAME                          | ADDDERG                               |            |   |                   |                |                            |
| STREET ADDRESS  |  | į                                  | 6.3 STREET                        |                                       |            |   |                   |                |                            |
| CITY-ST-ZIP   |  |                                    | 6.4 CITY-S                        | 1-211                                 | L          |   | <del></del>       |                |                            |

I hereby certify that the information supplied with this filling 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: Cilles Housens, let 1988

**FILED** 

May 14 1998 8:00am

Secretary of State