

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

FILED

97 AUG 15 PM 1:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # N02930 (8)
1. Corporation Name
SEA SHORE CONDOMINIUM ASSOCIATION, INC.3

297.50

Principal Place of Business Mailing Address
~~JOHN P. MORTARA~~ CENTURY 21 LEIB ASSOC. ~~JOHN P. MORTARA~~ SAME
~~P.O. BOX 10012~~ 14620 Perdido Key Dr. ~~P.O. BOX 10012~~
~~PENSACOLA FL 32534-7012~~ PENSACOLA, FL 32507

3. Date Incorporated or Qualified 05/07/1984 3a. Date of Last Report 02/28/1995

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 25 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country	4. FEI Number 59-3030004 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	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No
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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

~~MORTARA, JOHN P.~~ CENTURY 21 LEIB ASSOC.
~~4046 GUINEVERE DR.~~ 14620 PERDIDO KEY DR.
~~PENSACOLA FL 32514~~ PENSACOLA, FL 32507
James M. Leib II

81 Name CENTURY 21 LEIB ASSOCIATES REALTY
82 Street Address (P.O. Box Number Is Not Acceptable)
14620 Perdido Key Dr.
83 James M. Leib II
84 City Pensacola FL 85 Zip Code 32507

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 *James M. Leib II* DATE 5/17/96 6/4/97
(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD MORTARA, JOHN P. Peter Brambilla 4046 GUINEVERE DR. 2820 S. Colonial Dr. PENSACOLA FL Montgomery, AL 36111	☐ DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD DUFALT, ANNE 14777 PERDIDO KEY DR. PENSACOLA FL	☐ DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	STD MORTARA, ROGA G. 4046 GUINEVERE DR. PENSACOLA FL	☐ DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	CENTURY 21 LEIB ASSOC. 14620 Perdido Key Dr. Pensacola, FL 32507 James M. Leib II	☐ DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	Debbie D. Dykes 400 Reigh Court Franklin, TN 37064	☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	☐ Change ☐ Addition
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	☐ Change ☐ Addition
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	☐ Change ☐ Addition
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	☐ Change ☐ Addition
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	☐ Change ☐ Addition

REINSTATEMENT 96-97

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-08/18/97--01129--0110
***297.50 ***297.50

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: *Peter Brambilla* DATE 5/17/96 6/4/97 504-492-0744
(NOTE: Registered Agent signature required when reinstating)

CR2E037 (12/95)