N04256

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

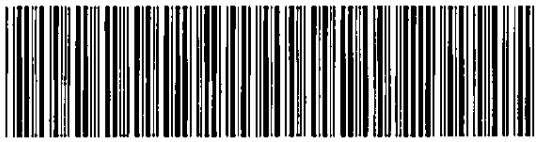
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



900441819409

NO42560

CORPORATION INFORMATION SERVICES, INC.
502 East Park Avenue Tallahassee, FL 32301 (904) 222-9171
MAILING ADDRESS: Post Office Box 10328 Tallahassee, FL 32302
TOLL FREE IN FLORIDA 1-800-342-8086

ORDER NUMBER	ORDER DATE	CUSTOMER NO.	TR CODE	REFERENCE
35488	7/17/84 courier	40920	006	Blue Crab Key Condo. - Wade Parsons

DESCRIPTION

DOMESTIC/NON-PROFIT/CERTIFIED COPY

CHARTER #

DATE FILED

1. Blue Crab Key Condominium Association, Inc.

Articles to be filed. State fees prepaid with your check #1195 ($30.00 made to state)

Call back as per request from Cale for Mr. Parsons.

*Documents received by Fed. Exp.

Sandra CAME

AUTHORIZED BY/RETURN TO

CORRECT directors

DATE 7/19/84

FOR EXAM Ltr

005 [illegible] 7/20/84 FILED
005 [illegible] 7/20/84 FILED
005 [illegible] 7/20/84 FILED
005 [illegible] 7/20/84 FILED
STATE
$30.00

CA-7-18-84
55
7/17/84
617
Ltr
Ltr
Ltr
Ltr

NAME

Parsons and Milligan
Attorneys at Law
Post Office Box 2462
Ft. Myers, Florida 33902

TELEPHONE NO. 813-337-3869

STATE COPY

EXHIBIT "2"

ARTICLES OF INCORPORATION

OF

BLUE CRAB KEY CONDOMINIUM

ASSOCIATION, INC.

FILED
84 JUL 13 PM 4:19
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The undersigned subscribers associate themselves through these Articles in order to form a corporation, not for profit under the laws of the State of Florida and do hereby adopt the following Articles of Incorporation:

ARTICLE I

The name of the Corporation is "BLUE CRAB KEY CONDOMINIUM ASSOCIATION, INC." hereinafter referred to as the Association.

ARTICLE II

The period of duration of the Corporation is perpetual.

ARTICLE III

The purpose of the Corporation is to provide an entity in accordance with the Florida Condominium Act, Chapter 718 to operate a condominium property located in Lee County, Florida known as BLUE CRAB KEY CONDOMINIUM.

ARTICLE IV

All the terms used in these Articles if Incorporation have the same meaning as described in the Declaration of Condominium for Blue Crab Key Condominium, unless these Articles specifically provide otherwise or unless the context dictates a contrary meaning.

ARTICLE V

The Association shall have all common law and statutory

powers permitted a corporation not for profit under the laws of the State of Florida, which do not conflict with these Articles, the Declaration of Condominium, the Association By-Laws and the Condominium Act. The Association shall have all powers set forth in the Condominium Act and such powers permitted by the Florida Condominium Act as shall be reasonably necessary to carry out its responsibilities for the operation of the Condominium in accordance with the Declaration of Condominium and the Association By-Laws, which powers shall include but not be limited to the following: (a) to make and collect assessments against members as unit owners for the purpose of exercising its powers in carrying out its responsibilities for the operation of the Condominium in accordance with the Declaration of Condominium and the Association By-Laws.

ARTICLE VI

The qualification of members of the Association shall be the ownership of a condominium unit parcel in Blue Crab Key Condominium which membership shall be evidenced and established by a recordation in the public records of Lee County, Florida of a deed conveying said condominium unit parcel fee title to the owner thereof. Upon recordation of such deed to a new owner, the membership of the prior owner of such unit shall be terminated. The manner of admission of members, the voting rights of members, the obligations and responsibilities of members shall be as established by the Condominium Declaration of Blue Crab Key Condominium as the same is recorded in the public records of Lee County, Florida and as the same may have been heretofore or may be hereinafter amended.

ARTICLE VII

The business affairs of the Association shall be managed

by a Board consisting of a number of Directors determined by the Association's By-Laws but in any event not less than three directors. Directors need not be members of the Association or reside in the condominium. The Board of Directors, its agents, contractors or employees shall exclusively exercise all of the powers of the Association consisting under the Condominium Act, Declaration of Condominium and the Association By-Laws and these Articles subject only to the approval of unit owners when such approval is specifically required. The Directors shall be elected at the annual meeting of the Association members in the manner provided for by the Association's By-Laws. Directors may be removed and vacancies on the Board may be filled as provided for in the Association's By-Laws. The members of the first Board of Directors shall serve terms as provided for in the Association's By-Laws and they or their replacements appointed by the Developer shall serve until time as unit owners, other than the Developer, are permitted to elect Directors as provided by the Condominium Act or an earlier date at the discretion of the Developer as provided for in the Association's By-Laws. The names and addresses of the first Board of Directors who shall hold office until their successors are elected and have qualified or until removed are as follows:

Same as those persons listed in Article VIII

ARTICLE VIII

The affairs of the Association shall be administered by the officers provided for in the By-Laws. At the first meeting of the Board of Directors following the Association's annual meeting, the Board shall elect the officers who will thereafter serve at the pleasure of the Board. The names and addresses of the officers who shall serve until such time as the Board of Directors appoints successors are as follows:

Nicholas Dakos	2017 Maravilla Lane Ft. Myers, Florida 33901
William Rex Dakos	2017 Maravilla Lane Ft. Myers, Florida 33901
Wade H. Parsons	2161 McGregor Blvd. Suite 1 Ft. Myers, Fl. 33902

ARTICLE IX

The Association shall indemnify directors, officers, members, employees or agents of the Association against all expenses and liabilities including attorney's fees, costs, judgments, fines, and settlements reasonably incurred, or imposed as a result of any proceeding to which any director, officer, member, employee or agent of the Association may have been a party or may have been otherwise involved by reason of his serving or previously having served the Association at its request. However, unless the Board of Directors approves indemnification as being in the best interest of the Association and places in the minutes of the meeting at which the decision is made, reasons therefore, no indemnification shall be permitted where a court of competent

jurisdiction decides that parties seeking indemnification was guilty of willful misfeasance or malfeasance in the performance of his duties. The right of indemnification shall not be exclusive of any rights to which a person seeking indemnification may be entitled.

ARTICLE X

The first By-Laws of the Association shall be adopted by the Board of Directors. The By-Laws may be amended, altered, or rescinded in any manner provided for in the By-Laws.

ARTICLE XI

The Articles may be amended as provided for in this Article. Notice of the subject of a proposed amendment must be included in the notice of the meeting at which the amendment is to be considered. A resolution for the adoption of the amendment may be proposed by either the Board of Directors or by any member of the Association. Any director or member of the Association not present in person or by proxy at the meeting may express his approval in writing providing that the approval must be in the possession of the Secretary of the Association at the meeting. Amendments may be approved by the affirmative vote of 2/3 of the members of the Association entitled to vote at a meeting at which a quorum has been obtained. No amendment shall change the qualifications for membership, voting, or property rights for members, the Association's obligations under Article V of these Articles to exercise its powers in accordance with the Condominium Act, the Declaration of Condominium, the By-Laws and these Articles. No amendment may be made which conflicts with the Declaration of Condominium or the Condominium Act. A copy of the amendment which is adopted shall be accepted and certified by the Secretary of State to be recorded in the

public records of Lee County, Florida.

ARTICLE XII

The names and addresses of the subscribers to these Articles of Incorporation are:

Nicholas Dakos	2017 Maraville Lane Ft. Myers, Florida 33901
William Rex Dakos	2017 Maraville Lane Ft. Myers, Florida 33901

ARTICLE XIII

The registered agent and the initial registered office of this corporation shall be WADE H. PARSONS, located at 2161 McGregor Boulevard, Fort Myers, Florida 33901.

IN WITNESS WHEREOF, the undersigned subscribers have affixed their signatures below at Fort Myers, Florida on this 7th day of March, 1984.

Nicholas Dakos

William Rex Dakos

STATE OF FLORIDA
COUNTY OF LEE

The foregoing instrument was freely and voluntarily acknowledged before me by NICHOLAS DAKOS who is well known to me to be the person described in and who

executed the Articles of Incorporation.

IN WITNESS WHEREOF, I have set my hand and seal at Lee County, Florida, this 7th day of March, 1984.

Gale L. Parsons
NOTARY PUBLIC

My Commission Expires:
NOTARY PUBLIC STATE OF FLORIDA
MY COMMISSION EXPIRES AUG 23 1986
BONDED THRU GENERAL INS. UNDERWRITERS

STATE OF FLORIDA
COUNTY OF LEE

The foregoing instrument was freely and voluntarily acknowledged before me by WILLIAM REX DAKOS who is well known to me to be the person described in and who executed the Articles of Incorporation.

IN WITNESS WHEREOF, I have set my hand and seal at Lee County, Florida, this 7th day of March, 1984.

Gale L. Parsons
NOTARY PUBLIC

My Commission Expires:
NOTARY PUBLIC STATE OF FLORIDA
MY COMMISSION EXPIRES AUG 23 1986
BONDED THRU GENERAL INS. UNDERWRITERS

STATE OF FLORIDA
COUNTY OF LEE

The foregoing instrument was freely and voluntarily acknowledged before me by _____ who is well known to me to be the person described in and who executed the Articles of Incorporation.

IN WITNESS WHEREOF, I have set my hand and seal at Lee County, Florida, this ____ day of _____, 1984.

NOTARY PUBLIC

My Commission Expires:

_____

Having been named to accept service of process for the above stated Corporation at place designated in these Articles of Incorporation, I hereby accept to act in this capacity and agree to comply with the provisions with all statutes relative to the proper compliance and performance of my duties.

DATED this 7th day of March, 1984.

BY: _____
WADE H. PARSONS

SECRETARY OF STATE
MAR 14 '84

ANNUAL REPORT
1985

Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of $20 Required — Make Checks Payable To: Secretary of State

NONPROFIT
BLUE CRAB KEY CONDOMINIUM ASSOCIATION, INC
% WADE H. PARSONS
2161 MCGREGOR BOULEVARD
FORT MYERS, FL 33901

Date Incorporated or Qualified to Do Business in Florida: 07/15/1954

Names and Street Addresses of Each Officer and Director as of December 31, 1984

	Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
1	DAKOS, NICHOLAS	D	2017 MARAVILLA LANE	FT MYERS, FL
2	DAKOS, WILLIAM REX	D	2017 MARAVILLA LANE	FT MYERS, FL
3	XXXXXXXXXXXXXXXXXXXXXXXXX	XXXX	XXXXXXXXXXXXXXXXXXXXXXXXX	XXXXXXXXXXXX
4				
5				
6				

Registered Agent Information

2. Name and Address of Current Registered Agent

PARSONS, WADE H.
2161 MCGREGOR BOULEVARD
FORT MYERS, FL 33901

3. Name and Address of New Registered Agent

Name

Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

...to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, organized under the laws of the State of Florida, submits this report for the purpose of changing its registered office or registered agent, or both, in the state of Florida. Such change was authorized by resolution duly adopted by its board of directors on

I accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE ______________________________ DATE ______
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes.

See signature requirements under instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As If Made Under Oath.

X [signature]

Nick Dakos

President

Date: May 1, 1985

813-283-3474

$5 additional fee required for a Certificate of Status

90 DAY NOTICE OF INTENT TO DISSOLVE

CORPORATION

ANNUAL REPORT
1986

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

◄ Read Notice and Instructions on Other Side Before Making Entries ►
Filing Fee of $20 Required – Make Checks Payable To: *Secretary of State*

1. Name and Address of Corporation Principal Office.

N04256 6
BLUE CRAB KEY CONDOMINIUM ASSOCIATION, INC.
% WADE H. PARSONS
~~2181 MCGREGOR BOULEVARD~~
FORT MYERS, FL 33901

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address 21 2138 Clifford Street

P.O. Box No. 22

City and State 23

Zip Code 24

3. Date Incorporated or Qualified To Do Business in Florida	4. Federal Employer Identification Number (FEIN) 59-2516411	5. Date of Last Report
07/18/1984		05/08/1985

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1985

Names of Officers and Directors 1	Title 2	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 3	City and State 4 5
1 DAKOS, NICHOLAS	D/P	2017 MARAVILLA LANE	FT MYERS, FL
2 DAKOS, WILLIAM REX	D/S	2017 MARAVILLA LANE	FT MYERS, FL
3			
4			
5			
6			

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

PARSONS, WADE H.
~~2181 MCGREGOR BOULEVARD~~
FORT MYERS, FL 33901

8. Name and Address of New Registered Agent

Name 81

Street Address (Do NOT Use P.O. Box Number) 82
2138 Clifford Street

City and State 83 FL.

Zip Code 84

Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on _____

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes.

See signature restrictions under instructions on reverse side of this form

To The Best Of My Knowledge And Belief, With Respect To The Matters Reported, I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath
Each Officer signing must be listed in Block 81.

Signature: [signature] Date: 5/22/86

Name and Title of Typed Officer: Nicholas Dakos Title: President and Director

Telephone Number: (813) 693-3471

If you want this to be a certificate of status check the box ☐ **$5 Additional Fee required for a Certificate of Status**

CR2EO34 (1/88)

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1, 1987

CORPORATION

ANNUAL REPORT

1987

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of $25 Required – Make Checks Payable To Secretary of State

1 Name and Address of Corporation Principal Office

N04256 b
BLUE CRAB KEY CONDOMINIUM ASSOCIATION, INC.
% WADE H. PARSONS
2138 CLIFFORD ST.
FORT MYERS, FL 33901

If above address is incorrect in any way, enter the correct address in item 3. Include Zip Code.

2 Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient.

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

Date Incorporated or Qualified To Do Business in Florida: 07/18/1984

4 Federal Employer Identification Number (FEIN): 59-2516411

5 Date of Last Report: 10/16/1986

Names and Street Addresses of Each Officer and Director, as of December 31, 1986

Names of Officers and Directors	Title 2	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 3	City and State 4 5
DAKOS, NICHOLAS	P/D	2017 MARAVILLA LANE	FT. MYERS, FL
DAKOS, WILLIAM REX	S/D	2017 MARAVILLA LANE	FT. MYERS, FL

REGISTERED AGENT INFORMATION

Name and Address of Current Registered Agent

PARSONS, WADE H.
2138 CLIFFORD ST.
FORT MYERS, FL 33901

6 Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84: FL.

Zip Code 85

Pursuant to the provisions of Sections 607.0502 and 607.0507, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on _____

Having been named the registered agent to accept service of process for the above-stated corporation, at the place designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with, and accept the obligations of, Section 607.325, F.S.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes

See signature instructions under instructions on reverse side of this form.

(Check) That I Am An Officer of the Corporation, the Relevant or Trustee Fund Named to Execute This Report as Required by Chapter 607, F.S.

Further Certify That I Understand All Statements And Facts Herein Must Be True To The Best Of My Knowledge And Belief, And That I Understand My Signature On This Report Shall Have The Same Legal Effect As If Made Under Oath

(Officer's name must be listed in Block 81)

Signature: Nicholas D. Dakos

Date: 7/1/87

Type or Print Name of Signing Officer: Nicholas V Dakos

Title: President

Telephone Number: 813-283-3474

CERTIFICATE OF STATUS (FEE) ☐

$5 Additional Fee required for a Certificate of Status

FILE NOW, OR THIS CORPORATION WILL BE DISSOLVED ON NOVEMBER 4, 1988!

CORPORATION

ANNUAL REPORT
1988

SEP 19 PM 3:57

Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of $25 Required — Make Checks Payable To: Secretary of State

N04256 6
BLUE CRAB KEY CONDOMINIUM ASSOCIATION, INC.
% WADE H. PARSONS
2138 CLIFFORD ST.
FORT MYERS, FL 33901

c/o Chris McEwan
5400 Pine Island Rd
Bokeelia, FL
33922

07/18/1984 | 59-2516411 | 08/18/1987

~~DAKOS, NICHOLAS~~	~~P/D~~	~~2017 MARAVILLA LANE~~	~~FT MYERS, FL~~
~~DAKOS, WILLIAM REX~~	~~S/D~~	~~2017 MARAVILLA LANE~~	~~FT MYERS, FL~~
Dakos, Nicholas	P/D	5280 Marina Rd.	Bokeelia, FL
Dakos, Dee	S/T/D	5280 Marina Rd	Bokeelia, FL
Young, Ralph	D	5280 Marina Rd	Bokeelia, FL

REGISTERED AGENT INFORMATION

PARSONS, WADE H.
2138 CLIFFORD ST.
FORT MYERS, FL 33901

McEwan, Chris
5400 Pine Island Rd.
Bokeelia FL 33922

DATE 9/9/88

Date 8/22/88

Nicholas Dakos | President/Director | (813) 283-3474

$5 Additional Fee required for a Certificate of Status

CORPORATION

ANNUAL REPORT

1989

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

FILED

1989 JUL 10 AM 11:02

FLORIDA DEPARTMENT OF STATE
CORPORATIONS DIVISION

Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of $35 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation's Principal Office

~~G87578~~

Blue Crab Key Condo Association
5280 Blue Crab Circle
Bokeelia, Fl. 33922

N04256

If above address is incorrect in any way, enter the correct address in item 2, including Zip Code.

2. Enter Change of Address of Corporation's Principal Office, P.O. Box Number Alone is NOT Sufficient

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3. Date Incorporated or Qualified To Do Business in Florida: On File

4. Federal Employer Identification Number (FEIN): 59-2520411 On File

5. Date of Last Report: On File

6. Names and Street Addresses of Each Officer and Director as of December 31, 1988

Title 1	Names of Officers and Directors 2	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 3	City and State 4
Pr/D	Nick Dakos	816 S.W. 45th Ter. #201C	Cape Coral, Fl. 33904
V. Pr/D	Dee Dakos	816 S.W. 45th Ter. #201C	Cape Coral, Fl. 33904
S. Tr./D	Ralph Young	5241 Blue Crab Circle D-1	Bokeelia, Fl. 33922

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

Chris McEwan
5400 Pine Island Rd
Bokeelia, Fl. 33922

8. Name and Address of New Registered Agent 98/7/10

Name 81

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84: FL.

Zip Code 85

9. Pursuant to the provisions of Section 607.1203 and 617.1803, Florida Statutes, the above-named corporation, incorporated under 07/17/89 of F 89137 has complied with the provisions of Chapter 607 and 617, Florida Statutes, for the purpose of changing its registered office or registered agent, as listed, in the State of Florida.

The original was authorized by resolution duly adopted by its board of directors on ...

I hereby accept the above appointment of my named agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

ANNUAL REPORT 35.00

ANNUAL REPORT

TOTAL 35.00

SIGNATURE (Registered Agent Accepting Appointment) DATE

If foreign corporation, also list jurisdiction incorporated in Florida

See signature instructions under instructions on reverse side of this form.

10. I, the Officer or Director of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S., Hereby Certify That I Understand My Signature On This Report 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 (Unless Otherwise Stated Below); and That the Facts Stated Herein Are True.

Signature

Nick Dakos President

Date 7/5/89

Telephone Number (813)283-3474

$5 Additional Fee Required for a Certificate of Status

FILE NOW! THIS REPORT MUST BE FILED BY NOVEMBER 7, 1990 OR THIS CORPORATION WILL BE DISSOLVED. FEE TO REINSTATE IS $236.25

CORPORATION:

ANNUAL REPORT

1990

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

90 NOV -8 AM 9:28

Filing Fee of $35 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

N04256 6

BLUE CRAB KEY CONDOMINIUM ASSOCIATION, INC.
5280 BLUE CRAB CIRCLE
BOKEELIA, FL. 33922

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2. If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box number alone is NOT sufficient. The NAME of the corporation can be changed only by filing an amendment.

Street Address 21: 12734 Kenwood Ln #30
P.O. Box No. 22:
City and State 23: Ft. Myers, Fl
Zip Code 24: 33907

3. Date Incorporated or Qualified To Do Business in Florida: 07/18/1984

4. FEI Number: 59-2516411

☐ FEI Number Applied For
☐ FEI Number Not Applicable

6. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

1 Title	2 Names of Officers and Directors	3 Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4 City and State	5
P/D	DAKOS, NICHOLAS	816 SW 48 TERR #201C	BOKEELIA, FL.	
V/D	DAKOS, DEE	816 SW 48 TERR #201C	BOKEELIA, FL.	
S/T/D	~~YOUNG, RALPH~~ James O'Neil	~~524T BLUE CRAB CIR D-1~~ 5481 T-5	BOKEELIA, FL.	

REGISTERED AGENT INFORMATION:

7. Name and Address of Current Registered Agent

MCEWAN, CHRIS
5400 PINE ISLAND RD.
BOKEELIA, FL. 33922

8. Name and Address of New Registered Agent

Name 81: Michael Fleming Hess / Daniel Assoc
Street Address 1 (Do NOT Use P.O. Box Number) 82: 12734 Kenwood Ln Suite 30
Street Address 2 (Do NOT Use P.O. Box Number) 83:
City and State 84: Ft. Myers FL
Zip Code 85: 33907

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on _____

I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 607.325, F.S.

SIGNATURE _____ DATE 10/30/90
(Registered Agent Accepting Appointment)

10. I 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; I further certify that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, F.S.

Signature: X _____ Date: _____

(Name and Title of Signing Officer or Director) Nick Dakos Title: President Daytime Telephone Number: 813 283 3478

11. (Optional) To request a reinstatement of status, check this box ☐

CERTIFICATE OF STATUS NUMBER

5% Annexation Fee required for a Certificate of Status

FILE NOW! CORPORATE STATUS WILL BE DELINQUENT AFTER JULY 1ST.

CORPORATION

ANNUAL REPORT

1991

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
FL. DEPT. OF STATE
CORPORATIONS DIV.
TALLAHASSEE, FL.
FILED

Fields Preprinted on Other Side Before Mailing Form

FILING FEE OF $61.25 REQUIRED

DO NOT WRITE IN THIS SPACE

1. Name and Mailing Address of Corporation

DOCUMENT #N04256 (6)

ZIP + 4 PRESORT

BLUE CRAB KEY CONDOMINIUM ASSOCIATION, INC.
12734 KENWOOD LANE #30
FT. MYERS FL. 33907-5639

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code

2. If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment

21 Street Address

22 P.O. Box No.

23 City and State

24 Zip Code

3. Date Incorporated or Qualified To Do Business in Florida: 07/18/1984

4. FEI Number: 59-2516411

FEI Number Applied For

FEI Number Not Applicable

5. $8.75 Additional Fee required for a Certificate of Status

CERTIFICATE OF STATUS DESIRED

6. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

Title 1	Names of Officers and Directors 2	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 3	City and State 4
P/D	DAKOS, NICHOLAS	816 SW 48 TERR #201C	BOKEELIA, FL.
V/D	DAKOS, DEE	816 SW 48 TERR #201C	BOKEELIA, FL.
S/T/D	~~O'NEU, JAMES~~	5481 BLUE CRAB CIR T-5	BOKEELIA, FL.

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

MICHAEL FLEMMING HESS / DANIEL ASSOC.
12734 KENWOOD LN. STE. #30
FT. MYERS, FL. 33907

8. Name and Address of New Registered Agent

81 Name

82 Street Address 1 (Do NOT Use P.O. Box Number)

83 Street Address 2 (Do NOT Use P.O. Box Number)

84 City FL.

85 Zip Code

Pursuant to the provisions of Sections 607.0502 and 607.0508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent or agent's address in the State of Florida. Such change was authorized by the corporation's board of directors.

Having been named as registered agent to accept service of process for the above-stated corporation, at the place designated in this certificate, I am familiar with and accept the obligations of Section 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

To the best of my knowledge and belief, I 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; I further certify that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607; and that my name appears in Block 6 or on an attachment with an address.

SIGNATURE [signature] DATE 4/5/91

Type or Print Name and Title [illegible] President

Daytime Telephone Number (Optional) (813) 332-2576

FILING FEE OF $61.25 REQUIRED—Make Checks Payable To: Secretary of State **$8.75 Additional Fee required for a Certificate of Status**

FILE NOW! CORPORATE STATUS WILL BE DELINQUENT AFTER JULY 1ST.

CORPORATION

ANNUAL REPORT

1992

APPROVED
SEC. OF STATE
CORPORATIONS DIV.
TALLAHASSEE, FLA.
FILED

FILING FEE $61.25 Make Payable To: Secretary of State

DOCUMENT # N04256 (6)

BLUE CRAB KEY CONDOMINIUM ASSOCIATION, INC.
12734 KENWOOD LANE #30
FORT MYERS FL 33907-5634

3. Date Most Recent Qualification or Annual Report: 07/18/1984

3a. 06/26/1991

4. FEI Number: 59-2516411

5. $8.75

6. Name and Street Address of Each Officer and Director (Do not use P.O. Box number unless no street address is available)

1	2 Name of Officers and Directors	3 Street Address (DO NOT use P.O. Box Number)	4 City, State, Zip
1a	P/D/T/S DAKOS, NICHOLAS	816 SW 48 TERR #201C	BOKEELIA, FL.
2	V/D DAKOS, DEE	816 SW 48 TERR #201C	BOKEELIA, FL.
3	D George Dabling	5301 Blue Crab circle	Bokeelia, FL
4	D Charles Owens	5231 Bl. Crab Cir	Bokeelia FL
5			
6			

REGISTERED AGENT INFORMATION

7. Name and Address of Registered Agent

MICHAEL FLEMMING HESS / DANIEL ASSOC.
12734 KENWOOD LN. STE. #30
FT. MYERS, FL. 33907

8. New Registered Agent's Name and Address

81 Name

82 Street Address (DO NOT use P.O. Box Number)

83 City

84 FL 85 Zip Code

BCK
5220
DATE 6/11/92
INITIAL

9. Registered Agent Acknowledgment — Date

10. Officer Certification

11. SIGNATURE

Mike Dakos — President — Date 6/8/92

12. Name and Address of Person to Whom Questions Should Be Directed

File Now. Filing Fee after May 1 is $225.00

ANNUAL REPORT
1993

DOCUMENT # N04256 (6)

BLUE CRAB KEY CONDOMINIUM ASSOCIATION, INC.
12734 KENWOOD LN STE 30
FORT MYERS FL 33907-5634

3. 07/18/1984 | 3a. 07/21/1992

4. 592516411

FILING FEE $25.00 | ANNUAL REPORT $61.25 + $138.75 CORPORATION SUPPLEMENTAL FEE
MAKE CHECK PAYABLE TO DEPARTMENT OF STATE

5. $8.75

6. $5.00

7. $138.75

9. Name and Address of Current Registered Agent

MICHAEL FLEMMING HESS / DANIEL ASSOC.
12734 KENWOOD LN. STE. #30
FT. MYERS FL 33907

10. Name and Address of New Registered Agent

81 Name: Michael Flemming Hess Inc

82 Address: 12734 Kenwood Ln Ste #30

83

84 City: Ft Myers | FL | 85 | 86

11.

12.

P/D/T
DAKOS, NICHOLAS
816 SW 48 TERR #201C
BOKEELIA FL

V/D
DAKOS, DEE
816 SW 48 TERR #201C
BOKEELIA FL

D
REIBLING, GEORGE
5301 BLUE CRAB CIR
BOKEELIA FL

D
OWENS, CHARLES
5231 BLUE CRAB CIR
BOKEELIA FL

13.

33922

Jean Dufresne
Clerk Circuit Court
Deputy Clerk

33922

SIGNATURE

FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT

1994

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

94 MAR 10 AM 7:54

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Current Name
BLUE CRAB KEY CONDOMINIUM ASSOCIATION, INC.

DOCUMENT #
N04256 (6)

Mailing Address
12734 KENWOOD LANE #32
FT. MYERS FL. 33907

Principal Place of Business
12734 KENWOOD LANE #32
FT. MYERS FL. 33907

DO NOT WRITE IN THIS SPACE

Please examine this form and make any necessary corrections, including additions, deletions and changes.

2. Street Address
21
22 #32
23
24 25 Country

2a. Principal Place of Business
26
27 Street Address #32
28 City & State
29 Zip 30 Country

3. Date Incorporated or Qualified: 07/18/1984
3a. Date of Last Report: 05/01/1993

4. FEI Number: 59-2516411
Applied For
Not Applicable

5. Current Status Owed: $5.00
6. Check Here If Entitled to Expedited Filing and Enclose Additional $5.00 May Be Added to Fees

7. Request Copies from Secretary of State
Certificate of Status
Certified Copy
Additional Copy

8. This corporation has elected to make its REGISTERED AGENT AND OFFICE Florida Statutes: Yes No

9. Name and Address of Current Registered Agent

MICHAEL FLEMING & ASSOCIATES INC.
12734 KENWOOD LN. STE. #32
FT. MYERS FL 33907

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 607.0503 of Sections 617.0502 and 617.0503, Florida Statutes, the undersigned 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 certify that the corporation has authorized the registered agent to act in this capacity. I further certify that I am familiar with, and accept the obligations of, Sections 607.0502 or 617.0503, Florida Statutes.

SIGNATURE: DATE:

12. OFFICERS AND DIRECTORS

P/D/T
DAKOS, NICHOLAS
816 SW 48 TERR #201C
BOKEELIA FL

V/D
DRYZOULA
5400 BLUE CRAB CIRCLE D
BOKEELIA FL

D
OWENS, CHARLES
5231 BLUE CRAB CIR
BOKEELIA FL

13. CHANGES TO OFFICERS AND DIRECTORS

D

S/T

P

14. I hereby certify that the information supplied with this filing is true and accurate. For profit corporations, the name and address of the registered agent and, if applicable, the name and address of the current officers and directors must be stated. Failure to do so will result in the dissolution of the corporation.

SIGNATURE: 3/11/94

SIGNATURE AND TITLE OF CHAIRMAN, PRESIDENT OR OTHER AUTHORIZED OFFICER OR AGENT

FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

1995

APPROVED

DOCUMENT # N04256 (6)

BLUE CRAB KEY CONDOMINIUM ASSOCIATION, INC.

95 MAR 15 AM 9:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

Principal Address	Mailing Address
12734 KENWOOD LANE #30 STE 32 FT. MYERS FL 33907 US	12734 KENWOOD LANE #30 STE 32 FT. MYERS FL 33907 US

1. Date Incorporation or Qualification: 07/18/1994
1a. Date of Last Report: 04/13/1994
4. FEI Number: 59-2516411
5. Certificate of Status Desired: $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution: $5.00 Must Be Added to Fee
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 F.S. 199... Florida Statutes: Yes / No

9. Name and Address of Current Registered Agent

MICHAEL FLEMING & ASSOCIATES INC.
12734 KENWOOD LN
STE 32
FT. MYERS FL 33907

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

...provisions of Section(s) 607.0502 and 607.1008, Florida Statutes, the above named corporation submits this statement for the purpose of changing its 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 ... and accept the obligations of, Section 607.0505, Florida Statutes.

OFFICERS AND DIRECTORS

D
DAKOS, NICHOLAS
816 SW 48 TERR #201C
BOKEELIA FL

ST
DRYZQULA
5400 BLUE CRAB CIRCLE D
BOKEELIA FL

P
OWENS, CHARLES
5231 BLUE CRAB CIR
BOKEELIA FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS

D Steve

D Angel Vega
5301 Blue Crab Circle
Bokeelia FL 33922

P Steve

V Terry Moore
5301 Blue Crab Circle
Bokeelia FL 33922

Xmas Stalwell
5301 Blue Crab Circle
Bokeelia FL 33922

...By this filing I certify that I have complied with the requirements of Section 607.0505, Florida Statutes, ... that my signature shall have the same legal effect as if made under oath; that I am a director or officer of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that I am familiar with the facts ...

SIGNATURE: [signature] 3/15/95