FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

| SHIPWATCH TWO CONDOMINIUM ASSOCIATION, INC. | | | | 100/1141 6/10/11/11/11/11/11/11/11/11/11/11/11/11/ | | |
|--|--|---|-----------------------------------|---|--|--|
| Principal Place of Business | | Mailing Address | | ı ındıkını alı obulı bidəd iliyi ilb | is dan drav dian billi dibi dibi Olbi (1811 190) | |
| 7850 ULMERTON ROAD SUITE 1 7850 I | | C/O HOLIDAY ISLES 7850 ULMERTON RO LARGO FL 34641 | PROPERTY MANAGEME AD SUITE 1 | | | |
| | | | | Date Incorporated or Qualified 07/23/1984 | 3a. Date of Last Report 02/06/1995 | |
| Principal Place of Busine | | 2a. Mailing Address | | 4. FEI Number | Applied For | |
| 21 % L. 10856 Suite, Apt. #, etc. | Mar Group | Suite, Apt. #, etc. | Mart. Group | 59-2557895 | Not Applicable | |
| 22 10(orf5 15+ | She | 27 10445 State | - Sr. 5 | 5. Certificate of Status Desired | \$8.75 Additional Fee Required | |
| 23 TREASULE | island Fl | 28 TREASUR | 5 ISLANDS | 6. Election Campaign Financing Trust Fund Contribution | \$5.00 May Be Added to Fees | |
| Zip 320.6 | Country | Zıp | Country | 8. This corporation has liability for | | |
| | and Address of Current | 29 337 06 | 30 USA | Florida Statutes | ☐ Yes ☐ No | |
| 3. 112110 | and reduces of Carrent | negistered Agent | 81 Name | 10. Name and Address of New R | tegistered Agent | |
| LAPETINA, JUNE R. 11590 SHIPWATCH DR #841 LARGO FL 34644 82 Street Address (P.O. Box Number is Not Acceptable) 13 Street Address (P.O. Box Number is Not Acceptable) 84 City TREPS JUST TSUAD FL 85 Zip Code 83706 85 Zip Code 83706 86 City TREPS JUST TSUAD FL 85 Zip Code 83706 87 City TREPS JUST TSUAD FL 85 Zip Code 83706 88 Zip Code 83706 89 Zip Code 83706 89 Zip Code 83706 80 Zip Code 83706 80 Zip Code 83706 81 Zip Code 83706 82 City TREPS JUST TSUAD FL 85 Zip Code 83706 83 Zip Code 83706 84 City TREPS JUST TSUAD FL 85 Zip Code 83706 85 Zip Code 83706 86 Zip Code 83706 87 Zip Code 83706 88 Zip Code 83706 88 Zip Code 83706 89 Zip Code 83706 89 Zip Code 83706 80 Zip Code 83706 80 Zip Code 83706 80 Zip Code 83706 80 Zip Code 83706 81 Zip Code 83706 82 Zip Code 83706 83 Zip Code 83706 83 Zip Code 83706 84 Zip Code 83706 85 Zip Code 83706 86 Zip Code 83706 87 Zip Code 83706 88 Zip | | | | | | |
| or registered agent or be familiar with and accept | ns of Sections \$17.0502 a oth, in the State of Florida the obligations of Section | nd 617.1508, Florida Statu . Such change was authori, n 617.0503, Florida Statute | | orporation submits this statement for the pur board of directors. I hereby accept the appo | pose of changing its registered office bintment as registered agent. I am | |
| Signature, floud or | printed name of registered agent an | d title if applicable / (N | OTE Registered Agent signature in | equired when reinstating) | DATE | |
| 12. | OFFICERS AND | | 13. | ADDITIONS/CHANGES TO OFF | | |
| TITLE PSD | | DELETE | 1 1 TITLE | PD | Change Addition | |
| NAME LAPETIN | • | | 1 2 NAME | DAN LAPETWA | 4 844 | |
| STREET ADDRESS 11590 S CHTY-ST-ZIP LARGO | HIPWATCH DR #841 | / | 1.3 STREET ADDRESS | 11590 SHI AWATCH DRI | + 041 | |
| TITLE V | <u> </u> | DELETE | 1.4 CITY-ST-ZIP 2.1 TITLE | LARGO, FL | Change Addition | |
| NAME BAILIN, I | łarvey | - Deterie | 2 2 NAME | GEORGE SCOTT | | |
| | HIPWATCH DR #642 | , | 2 3 STREET ADDRESS | 11590 SHIPWOTON DR. | | |
| CITY-ST-ZIP LARGO | | | 2 4 CITY - ST - ZIP | LARGO, PL | _ | |
| TITLE TD | | DELETE | 3 1 TITLE | 50 | Change Addition | |
| | A, RALPH | | 3.2 NAME | CUALTER MARCHUCK | | |
| | HIPWATCH DR #242 | | 3.3 STREET ADDRESS | 1590 Shipwaren dr | | |
| CITY-ST-ZIP LARGO I | <u>r</u> | DELETE | 3.4. CITY-ST-ZIP | LARGO, FL | | |
| NAME | | | 4.1 TITLE | | ☐ Change ☐ Addition | |
| STREET ADDRESS | | | 4. 2 NAME 4.3 STREET ADDRESS | | | |
| CITY-ST-ZIP | | | 4.4 CITY-ST-ZIP | | | |
| TITLE | | DELETE | 5 1 TITLE | 50000178 | Addition | |
| NAME | | | 5 2 NAME | -04/15/96010 | 77014 | |
| STREET ADDRESS | | | 5 3 STREET ADDRESS | ***61.25 | 11 011 | |
| CITY-ST-ZIP | | | 5.4 CITY - ST - ZIP | | | |
| TRILE | | DELETE | 6.1 TITLE | | Change Addition | |
| NAME STREET ADORCCC | | | 6.2 NAME | | | |
| STREET ADORESS | | | 6.3 STREET ADDRESS | | 4-15-96JR | |
| 14. I do hereby certify that # | oformation supplied with | n this fiting is voluntarily furn | 64 CITY-ST-ZIP | lify for the exemption stated in Section 119.0 | | |
| oath; that I am an officer | or director of the cornorat | report or supplemental ann ion or the receiver or truste an attachment with an addr | nual report is true and act | curate and that my signature shall have the set this report as required by Chapter 617, Flo | 7(3)(k), Flonda Statutes. I further same legal effect as if made under rida Statutes; and that my name | |