

2007 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT (AR)

FILED
Feb 21, 2007 8:00 am
Secretary of State

02-21-2007 90028 039 ****61.25

DOCUMENT # N05164

1. Entity Name

PIER FORTY-THREE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

944 S. PENINSULA DR., #407
DAYTONA BEACH FL 32118
US

Mailing Address

944 S. PENINSULA DR., #407
DAYTONA BEACH FL 32118
US

2. Principal Place of Business - No P.O. Box #

Suite, Apt. #, etc.

City & State

Zip

Country

3. Mailing Address

Suite, Apt. #, etc.

City & State

Zip

Country

1st MOORE

CR2E037 (10/06)

4. FEI Number

59-2480585

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Name and Address of Current Registered Agent

SOUTHEAST MANAGEMENT SERVICES, INC.
3511 S. PENINSULA DRIVE
DAYTONA BEACH SHORES FL 32127

7. Name and Address of New Registered Agent

Name

Street Address (P.O. Box Number is Not Acceptable)

City

FL

Zip Code

8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of registered agent.

SIGNATURE

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

(NOTE: Registered Agent signature required when reinstating)

DATE

FILE NOW: FEE IS \$61.25
Due By May 1, 2007

9. Election Campaign Financing
Trust Fund Contribution. ☐

\$5.00 May Be
Added to Fees

Make Check Payable to
Florida Department of State

10. OFFICERS AND DIRECTORS

TITLE: TR
NAME: FOSTER, HARRIET ☐ Delete
STREET ADDRESS: 944 S PENINSULA DR. #405
CITY-ST-ZIP: DAYTONA BEACH FL 32118

TITLE: P
NAME: GROSHE, JUNE ☒ Delete
STREET ADDRESS: 944 S. PENINSULA DR., #502
CITY-ST-ZIP: DAYTONA BEACH FL 32118

TITLE: S
NAME: MANDEL, PAUL ☐ Delete
STREET ADDRESS: 944 S. PENINSULA DR. # 407
CITY-ST-ZIP: DAYTONA BEACH FL 32118

TITLE: V
NAME: HOWARD, SHANNON ☒ Delete
STREET ADDRESS: 944 S. PENINSULA DR., #404
CITY-ST-ZIP: DAYTONA BEACH FL 32118

TITLE: D
NAME: BISHARD, ROGER ☒ Delete
STREET ADDRESS: 944 S. PENINSULA DRIVE # 206
CITY-ST-ZIP: DAYTONA BEACH FL 32118

TITLE: ☐ Delete
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: P
NAME: BISHARD, ROGER ☐ Change ☐ Addition
STREET ADDRESS: 944 S. PENINSULA DR. #206
CITY-ST-ZIP: DAYTONA BEACH, FL 32118

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

TITLE: D
NAME: SHANNON, HOWARD ☐ Change ☐ Addition
STREET ADDRESS: 944 S. PENINSULA DR #404
CITY-ST-ZIP: DAYTONA BEACH, FL 32118

TITLE: D
NAME: FISCHER, ROBERT ☐ Change ☐ Addition
STREET ADDRESS: 944 S. PENINSULA DR # 103
CITY-ST-ZIP: DAYTONA BEACH, FL 32118

TITLE: ☐ Change ☐ Addition
NAME:
STREET ADDRESS:
CITY-ST-ZIP:

12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Section 119, Florida Statutes. I further certify that the information indicated on this report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE:

Harriet M. Foster
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

2/9/07
Date

Daytime Phone #