

FILE NOW: FILING FEE IS \$61.25

FILED
Mar 02, 1999 8:00 am
Secretary of State

0079359

NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

03-02-1999 90013 024 \*\*\*\*61.25

DOCUMENT # N05445

1. Corporation Name TWO HUNDRED WEST CONDOMINIUM OWNER'S ASSOCIATION, INC.

Principal Place of Business: 200 MIRACLE STRIP PKWY. P. O. BOX 4641 FT. WALTON BCH. FL 32549 US
Mailing Address: 200 MIRACLE STRIP PKWY. P. O. BOX 4641 FT. WALTON BCH. FL 32549 US



2. Principal Place of Business, 2a. Mailing Address, 3. Date Incorporated or Qualified (10/02/1984), 4. FEI Number (59-2521351), 5. Certificate of Status Desired, 6. Election Campaign Financing

9. Name and Address of Current Registered Agent (MCINNIS, JEFF), 10. Name and Address of New Registered Agent

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...

SIGNATURE: Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Table with 2 main columns: 12. OFFICERS AND DIRECTORS, 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Rows include Gardner, Jack; Klinner, Charles; Plaster, Mike; MCMicheal, Tom; Williamson, Kenneth; Reagan, Robert.

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate...

SIGNATURE: SIGNATURE REQUIRED. SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR. Date. Daytime Phone #

CR2E037 (11/98)