

amended

FILE NOW: FILING FEE IS \$61.25

CORRECTED FOR 1997

NONPROFIT CORPORATION ANNUAL REPORT 1997



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

FILED 97 JUL 10 PM 2:44 SECRETARY OF STATE TALLAHASSEE, FLORIDA

DOCUMENT # NO7414 (8) LEMON BAY BREEZES MASTER ASSOCIATION INC.

Principal Place of Business Mailing Address 1401 MCCALL ROAD SOUTH ENGLEWOOD FL 34223

2. Principal Place of Business 2a. Mailing Address 21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc. 22 City & State 27 City & State 23 Zip 25 Country 29 Zip 30 Country

3. Date Incorporated or Qualified 01/31/1985 3a. Date of Last Report 03/31/1997 4. FEI Number 65-0146484 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

9. Name and Address of Current Registered Agent STENGER, JOHN 1401 S. MCCALL RD. ENGLEWOOD, FL 34223

10. Name and Address of New Registered Agent 81 Name Richard E Sullivan 82 Street Address (P.O. Box Number is Not Acceptable) 1401 S. McCall Rd #107B 83 84 City Englewood FL 85 Zip Code 34223

11. Pursuant to the provisions of Sections 617.0502 and 617.0508, 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 [Signature] (NOTE: Registered Agent signature required when reinstating) DATE 7/8/97

Table with 5 rows and 2 columns: 12. OFFICERS AND DIRECTORS. Columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP. Rows include STENGER, JOHN; STENGER, FABIOLA; DRAGON, REGINALD.

Table with 5 rows and 2 columns: 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12. Columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP. Rows include SULLIVAN, RICHARD.

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), 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: [Signature] RICHARD SULLIVAN 6/25/97 941-474-3478

CP2E037 (9/96)