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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

N07414

(8)

LEMON BAY BREEZES MASTER ASSOCIATION, INC.

Principal Place of Business Maiting Address 1401 MCCALL ROAD SOUTH 1401 MCCALL ROAD SOUTH 3. Date Incorporated or Qualified ENGLEWOOD FL 34223 ENGLEWOOD FL 34223 <u>01/31/1985</u> 4. FEI Number Applied For 65-0146484 Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 5. Certificate of Status Desired 21 Fee Required Suite, Apt. #, etc. Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be 22 27 Trust Fund Contribution Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? 23 28 Yes Ζıp Country Country 8. This corporation owes or has paid the current year Intangible Yes 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent Name and Address of New Registered Agent **B1** Name SULLIVAN, RICHARD E 62 Street Address (P.O. Box Number is Not Acceptable) 1401 S MCCALL RD., #107B ENGLEWOOD FL 34223 R3 City Zip Code

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, 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.

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SIGNATURE _	Signature, typed or printed name of registered agent and title	Harris Mior			DATE	
12.	OFFICERS AND DIREC	13.	al signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	0	DELETE	1.1 TITLE	7,001110110,01010102010	☐ Change	Addition
NAME	STENGER, JOHN	_	1.2 NAME			
STREET ADDRESS	19 SCHANCK ST.		1.3 STREET ADDRESS			
CITY-ST-ZIP	FREEHOLD NJ		1.4 CITY - ST - ZIP			
TITLE	PD	DELETE	2.1 TITLE		Change	Addition
NAME	SULLIVAN, RICHARD		2.2 NAME		- •	_
STREET ADDRESS	1401 MCCALL ROAD SOUTH		2.3 STREET ADDRESS			
CITY-ST-ZIP	ENGLEWOOD FL 34223		2. 4 City-St-ZiP			
TITLE	D	DELETE	3.1 TITLE		Change	Addition
NAME	DRAGON, REGINALD		3.2 NAME			
STREET ADDRESS	1401 S. MCCALL ROAD		3.3 STREET ADDRESS			
CITY-ST-ZIP	ENGLEWOOD FL 34223		3.4. CITY - ST - ZIP			
TITLE		DELETE	4.1 TITLE		Change	Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY-ST-ZIP			
TITLE		DELETE	5.1 TITLE		Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY - ST - ZIP			
TITLE		DELETE	6.1 TITLE		Change	Addition
NAME			6.2 NAME			
STREET ADDRESS			6.3 STREET ADDRESS			

14. I 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 supplied 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 of 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:

Per 1 12 1998

FILED

Apr 23 1998 8:00am

Secretary of State

474-3478

:R2E037 (10/97)