

FROM : Mary Ann W. Salazar
 09/27/1999 11:25 9044268359

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Sep. 28 1999 05:28AM P2

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NONPROFIT CORPORATION ANNUAL REPORT 1999

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

DOCUMENT # N09947 ✓
 1. Corporation Name
 4300 CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business
 4300 CONDO ASSOC INC
 4312 80 ATLANTIC AVE
 NEW SMYRNA BEACH FL 32189

Mailing Address
 4300 CONDO ASSOC INC
 4312 130 ATLANTIC AVE
 NEW SMYRNA BEACH FL 32189

2. Principal Place of Business
 27 Suite, Apt. #, etc.
 City & State
 Zip Country

3. Mailing Address
 28 Suite, Apt. #, etc.
 City & State
 Zip Country

4. Name and Address of Current Registered Agent
 LOMONACO, LAWRENCE
 4312 8 ATLANTIC AVE
 NEW SMYRNA BCH FL 32189

5. Name and Address of New Registered Agent
 Name
 SS
 MS
 City
 FL
 Zip Code

11. OFFICERS AND DIRECTORS		12. ADDITIONAL CHARGES TO OFFICERS AND DIRECTORS IN 11	
11.1 NAME LOMONACO, LARRY	<input type="checkbox"/> DELETE	12.1 TITLE President/Director	Mary Ann Salazar 801 Arlington Blvd Altamonte Springs, FL 32701
11.2 STREET ADDRESS 4312 8 ATLANTIC AVE NEW SMYRNA BEACH FL		12.2 NAME Don Clifton	
11.3 CITY-STATE-ZIP NEW SMYRNA BEACH FL		12.3 STREET ADDRESS 310 Navigator's Way Edgewater, FL 32141	
11.4 TITLE BO	<input type="checkbox"/> DELETE	12.4 TITLE Treasurer/Director	
11.5 NAME BLAIS, ROBERT		12.5 NAME Thanos Patricostas	
11.6 STREET ADDRESS 4312 8 ATLANTIC AVE NEW SMYRNA BCH FL		12.6 STREET ADDRESS 698 Oyster Quay N.S.B., FL 32169	
11.7 CITY-STATE-ZIP NEW SMYRNA BEACH FL		12.7 CITY-STATE-ZIP N.S.B., FL 32169	
11.8 TITLE TD	<input type="checkbox"/> DELETE	12.8 TITLE Secretary/Director	
11.9 NAME CLIFTON, DON		12.9 NAME Frank Zarh...	
11.10 STREET ADDRESS 688 OYSTER QUAY NEW SMYRNA BEACH FL		12.10 STREET ADDRESS 884 Oyster Quay N.S.B., FL 32169	
11.11 CITY-STATE-ZIP NEW SMYRNA BEACH FL		12.11 CITY-STATE-ZIP N.S.B., FL 32169	
11.12 TITLE Vice President/Director	<input type="checkbox"/> DELETE	12.12 TITLE Kenneth Bureess	
11.13 NAME CLIFTON, DON		12.13 NAME 36 Jackson Drive	
11.14 STREET ADDRESS 310 NAVIGATOR'S WAY EDGEWATER FL		12.14 STREET ADDRESS MILFORD, CT 06460	
11.15 CITY-STATE-ZIP EDGEWATER FL		12.15 CITY-STATE-ZIP MILFORD, CT 06460	

13. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in 6
 is reported on the annual report or supplemental annual report is true and accurate and that my signature will have the same legal effect as if
 officer or director of the corporation or the receiver or trustee authorized to prepare this report as required by Chapter 617, Florida Statutes; and that my name appears in
 Block 12 or Block 13 or on an attachment with an address with all other officers.

SIGNATURE: MARY ANN W. SALAZAR 5-28-99

FILED
 99 OCT -1 PM 11:07
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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