FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

N12007

(3)

THE COURTYARDS AT MAYPORT I CONDOMINIUM ASSOCIATION, INC.

,								
Principal Place of Business Mailing Address						E OMBESION, MAN SIMBO BEMES MOREN MORTE ANTERE SI	YO I ALON DHOST BIDST OLD	JUL OFOEL BEOFI PORT
1079-9 ATLANTIC BLVD ATLANTIC BEACH FL 32233		1078-9 ATLANTIC BLVD ATLANTIC BEACH FL 32233-3317						
US		US				3. Date Incorporated or Qualified 11/08/1985	3s. Date of La 04/12/	st Report 1996
2. Principal Pl	lace of Business	2a. Mailing Address				4. FEI Number	1 0 1/ 1-/	Applied For
21		26				59-2907669	 	Not Applicable
Suite, Apt.	#, etc	Suite, Apt. #, etc.				5. Certificate of Status Desired	7	5 Additional e Required
City & State	3	City & State				6. Election Campaign Financing	\$5.	00 May Be
23		28				Trust Fund Contribution		ded to Fees
Zip Country		Zip	 			8. This corporation has liability for intangible tax under s. 199.032,		
24	25 29 30 9. Name and Address of Current Registered Agent		30			Florida Statutes Yes No 10. Name and Address of New Registered Agent		
	9, Name and Address of Curre	ont Registered Agent		Name		10. Name and Address of New Re	Alateleo Adeur	/////////////////////////////////////
			["					
	FRANCES C.		82 Street Ad		t Addres	dress (P.O. Box Number is Not Acceptable)		
	REALTY SERVICES, INC.		h _i	13				
	ITLANTIC BLVD. C BEACH FL 32233		L		······································			
ALLANIE	O BEAUTI PL 32233			Lity City			FL 85	Zip Code
office or r	to the provisions of Sections 617.05 egistered agent, or both, in the Stat m familiar with, and accept the obli	e of Florida. Such change was	authorized	by the co	d corpor orporation	ation submits this statement for the pair of the pair of directors. I hereby acceptions are the pair of directors and the pair of the pair	ourpose of changing the appointmen	ng its registered t as registered
SIGNATURE								
	Signature, typed or printed name of registered as	gent and title if applicable (NC ND DIRECTORS	TE Registered	Agent signatu	re required	when reinstating) ADDITIONS/CHANGES TO OFFIC	DATE	TODE IN 12
12. 101LE	V OFFICERS AI	ND DIRECTORS DELETE	1.1 ((1)	F	D	ADDITIONS/CHANGES TO OFFIC	CENS AND DIREC	
NAME	TURNER, CARL		1.2 NAM		MA	ragget Jacks	• •	
STREE ADDRESS	902 DEFENDER CT. W			 Eet address	20	sof challenger C	TE	
CITY-ST-ZIP	ATLANTIC BEACH FL			-ST-ZIP	At	bantic Beach, FL	32223	
TITLE	D	☐ DELETE	2.1 TITL			\$/D	🔼 Char	nge 🔲 Addition
NAME	JAMES SWORD		2.2 NA	AE	10.	51 TURNER		
STREET ADDRESS	504 COURAGEOUS CT, S		2.3 STR	eet address	21	or challenger	C7. E	-
CITY-S1-ZIP	ATLANTIC BEACH FL		2. 4 CiT	Y-ST-ZiP	_ A	Hantic Beach,	FI 3772	
TITLE	D	☐ DELETE	3.1 TITU		17/	D. S. soal	Chai	-
NAME	DAVID LOPANIK		3.2 NA	•••	120	LHES SWORD	≏Τ, S	
STREET ADDRESS			1	STREET ADDRESS SOLF COUNTAGEOUS CT, S SOLF COUNTAGEOUS CT, S CITY-SI-ZIP Atlantic Beach, F1 32233				
CITY-ST-ZIP TITLE	ATLANTIC BEACH FL	DELETE	3.4. CH 4.1 Title	Y-ST-ZIP	+ **	TOUCHEE BELLIN	☐ Chai	nge Addition
NAME	TEMPLE, KEITH	La Pilita	4.2 NA					The Country
	2205 SPANISH MOSS DRIVE	1		mi. Eet address		,		
STREET ADDRESS City-St-Zip	JACKSONVILLE FL 32248	•	1	r-st-zip				
TITLE	T	DELETE	5.1 TITI				☐ Chai	nge Addition
NAME	SCHMITTGES, JOE		5.2 NA	AE .				
STREET ADDRESS	1902 CHALLENGER CT E		5.3 \$TR	EET ADDRESS	s			
CITY-ST-ZIP	ATLANTIC BEACH FL 32233		5.4 CIT	Y-ST-ZIP				
TIFLE		DELETE	6.1 TITI	E			☐ Cha	nge Addition
NAME			6.2 NA	AE .		•		
STREET ADDRESS			6.3 STF	EET ADDRESS	s			

14. If do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(1), 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

SONATURE AND TYPED OR PRINTED NAME OF INTRING DEFICER OR DIRECTOR

THE MARGO

(904)249-232 Daytime Phone # 0005201

FILED

May 08 1997 8:00am

Secretary of State

A TRANSPORTUS TOU THÀID MÀIR BANN BÀIN THÀI CHAN BIÐIR CHAIN BIÐIR ÁRÐIR ÁRÐIR ÉRÁN TÞÁ

CR2E037 (9/96)