## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N13507

(1)

AEGEAN HIDE-A-WAY CONDOMINIUM ASSOCIATION, INC.

## FILED Feb 10 1998 8:00am Secretary of State

AEGENIA FIIDE KAAAL OOMBONINIONI AGGOOMETON, INC.										
Principal Plac	e of Business	Mailing Address				1 14831161 641 (1864 1108) 81110 5431 161	)	II DIQII BIQII IQBI		
676 76TH AVE. ST. PETERSBUI US	UNIT 4 RG BCH FL 33706	676 76TH AVE. UNIT 4 STP PETERSBURG BCH FL 33706 US				3. Date Incorporated or Qualified 02/20/1986				
							4. FEI Number NOT APPLICABLE	<u> </u>	Applied For Not Applicable	
<del></del>	lace of Business	2s. Mailing Address	2a. Mailing Address 26				5. Certificate of Status Desired		5 Additional	
Suite, Apt.	# elc		Suite, Apt. #, etc.				6 Startier Committee Financian		Required	
22	n, 410.	27				ŀ	6. Election Campaign Financing Trust Fund Contribution		May Be	
City & Stat	е	City & State				7. Is this nonprofit corporation a hor				
23		28				∑ Yes ☐ No				
Zip	Country	Zip Country				8. This corporation owes or has paid the current year Intangible				
24	25	29	29 30			Personal Property Tax du		June 30. Yes Yo		
	9. Name and Address of Curren	t Registered Agent					<ol><li>Name and Address of New Reg</li></ol>	istered Agent		
				81	Name	•				
SMITH, GORDON B. 674 76 AVE.					Street	Address	s (P.O. Box Number is Not Acceptable	e)	<del></del>	
						Address (F.S. Dox Harrison in Not Addeptions)				
ST. PETER\$BURG BEACH FL 33706				83						
				84	City	<u> </u>		<b>85</b> Z	Zip Code	
					•	•		FL	·	
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.										
SIGNATURE										
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstatting) DATE										
12.	OFFICERS AND		13.			·r ·····	ADDITIONS/CHANGES TO OFFICE			
TITLE	_			1.1 TITLE				☐ Chan	ge 🔲 Addition	
NAME	FREIHOFER, ROBERT			1.2 NAME						
STREET ADDRESS	AT DETERMINE DESCRIPTION				S STREET ADDRESS				-	
CITY-ST-ZIP TITLE	VPD	DELETE	DELETE 2.1 T		ITY-ST-ZIP			Chan	ge L Addition	
	JACK PARSTON					٠. م	k Preston	E CHO	80 Marition	
NAME	670 76 AVE.		22 N		4000500	196	JACK I KESION		1	
STREET ADDRESS	ST. PETERSBURG BEACH FL			2.3 STREET ADDRESS						
CITY-ST-ZIP TITLE	SD			2. 4 City-St-ZiP 3.1 Title		<del> </del>		☐ Chan	ge Addition	
NAME	LEMONOPOULOS, BOBBYE							ر بین		
STREET ADDRESS	676 76 AVEVE UNIT 5				ADDRESS					
CITY-ST-ZIP	ST. PETE BEACH FL 33706			HTY-S					ŀ	
TITLE	TD	DELETE 4.1 TO			., 4.11			Chan	ge Addition	
NAME	SMITH, GORDON B		4.2 h						Ì	
STREET ADDRESS	674 76 AVE				ADDRESS					
CITY-ST-ZIP	ST. PETE BEACH FL 33706			TY-\$1						
TITLE	8AA	☐ DELETE	5.1 TI					☐ Chan	ge Addition	
NAME	SMITH, EVELYN G		5.2 N	AME					ĺ	
STREET ADDRESS	674 76 AVE.		5.3 S	TREET	address				į	
CITY-ST-ZIP	ST. PETE BEACH FL 33706		5.4 C	(TY - S)	T-ZIP	<u></u>				
TITLE		☐ DELETE	6.1 71	TLE				☐ Chan	e Addition	
NAME			6.2 N	AME						
STREET ADDRESS			6.3 S	TREET	ADDRESS	1				
CITY-ST-ZIP			6.4 C	ITY-SI	T-ZIP	<u></u>				
14. Thereby o	certify that the information supplied wi	th this filing does not qualify t	or the exe	empt	ion state	ed in Se	ction 119.07(3)(i), Florida Statutes. I fu	urther certify that	the information	

6. 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 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 chapted, or on an attachment with an addless.

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