

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 APR 27 AM 9:04

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # N13914 (9)

1. Corporation Name

**EDWARD H. WHITE II OFFICE CONDOMINIUM ASSOCIATIO
N, INC.**

Principal Place of Business

Mailing Address

**7162 HUNT CLUB LANE
SEMINOLE FL 34646**

**7162 HUNT CLUB LANE
SEMINOLE FL 34646**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/19/1986

3a. Date of Last Report

03/29/1994

4. FEI Number

59-2182070

Applied For

Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

7. Nonprofit with IRS 501(c)(3)

☐

**\$68.75 Supplemental
Fee Not Required**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes

☒ No

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**VINCI, LOUIS J.
7162 HUNT CLUB LANE
SEMINOLE FL 34646**

01 Name

02 Street Address (P.O. Box Number is Not Acceptable)

03

04 City

FL

05 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and fee if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

PD

NAME

VINCI, LOUIS J.

STREET ADDRESS

7162 HUNT CLUB LANE

CITY - ST - ZIP

SEMINOLE FL

1.1 TITLE

☐ Change

☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY - ST - ZIP

TITLE

VD

NAME

WELCH, GEORGE H. JR.

STREET ADDRESS

1411 N. FLAGLER DR. SUITE 4200-8300

CITY - ST - ZIP

WEST PALM BEACH FL

2.1 TITLE

☐ Change

☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

TITLE

STD

NAME

LIGHT, JAMES M.

STREET ADDRESS

2299-9TH AVE. NORTH

CITY - ST - ZIP

ST. PETERSBURG FL

3.1 TITLE

☐ Change

☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

TITLE

D

NAME

BURNS, FRANCIS JOSEPH

STREET ADDRESS

1033-7TH AVE. NORTH

CITY - ST - ZIP

ST. PETERSBURG FL

4.1 TITLE

☐ Change

☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY - ST - ZIP

TITLE

D

NAME

KULLMAN, GEORGE

STREET ADDRESS

501-11TH ST. NORTH

CITY - ST - ZIP

ST. PETERSBURG FL

5.1 TITLE

☐ Change

☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

TITLE

NAME

STREET ADDRESS

CITY - ST - ZIP

6.1 TITLE

☐ Change

☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(k), 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Signature Fee \$