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 #

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

TITLE

NAME

N14571

(6)

BLAKE PARK CONDOMINIUM ASSOCIATION, INC.

	ce of Business	Mailing Address			NAME DIE IN ARBIT AND IT BIE IN FARM
Filingipal Plac	TO OL DUBINOSS	Mailing Address			
				3. Date incorporated of Quanties	
OIO TIPOLIA	A LACIAIDE	010 THOMAS & HOUSE		<u>'</u>	
C/O THOMAS A. HOWZE 5414 28TH STREET		C/O THOMAS A. HOWZE 5414 26TH STREET		4. FEI Number	Applied For
BRADENTON		BRADENTON FL 34207-3169)	04/24/1986	Not Applicable
	Place of Business	2a. Mailing Address		5. Certifice mont Status Desired	\$8.75 Additional
21		26		5. Certifiga 2886 008 Desired	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		26		Yes No	
Zip	Country	Zip	Country	8. This corporation owes or has paid the c	
24	25		30		Yes No
9. Name and Address of Current Registered Agent				10. Name and Address of New Registered	1 Agent
			81 Name		
			82 Street Add	ress (P.O. Box Number is Not Acceptable)	
HOHER THOMAS A					
HOWZE, THOMAS A.			83		
5414 28TH STREET			84 City		85 Zip Code
DIVIDENT ON PL 34207				Fi	_
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.					
agent. I s	am familiar with, and accept the obliga	itions of, Section 617.0503, Flor	ida Statutes.	tion's board of directors. Thereby accept life ap	Applittinent as registered
SIGNATURE					
	Signature, typed or printed name of registered ager		Registered Agent signature requi		
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFICERS AN	
TITLE		☐ DELETE	1.1 TITLE		Change Addition
NAME	PD		1.2 NAME		
STREET ADDRESS	HOWZE, THOMAS A.		1.3 STREET ADDRESS		
CITY-ST-ZIP	8414 26TH STREET W.	Document	1.4 CITY-ST-ZIP		
TITLE	BRADENTON FL	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	STD		2.2 NAME]
STREET ADDRESS	GRAHAM, WALTER B.		2.3 STREET ADDRESS		1
CITY-ST-ZIP	2010 59TH STREET W.	B.P. 1	2 4 CITY-ST-ZIP		
TITLE	BRADENTON FL	☐ DELETE	3.1 TITLE		Change Addition
NAME	VD		3.2 NAME		
STREET ADDRESS	MEYER, ROGER A.		3.3 STREET ADDRESS		J
CITY-ST-ZIP	217 MANATEE AVENUE E.		3.4. CITY-ST-ZIP		
TITLE	BRADENTON FL	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	DANDENIUM PL		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			52 NAME		J

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 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.

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

DELETE

☐ Addition

Feb 10 1998 8:00am

Secretary of State