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 # N18542 (3)
1. Corporation Name

420 BUILDING CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
2275 ATLANTIC BLVD. NEPTUNE BEACH FL 32266	2275 ATLANTIC BLVD. NEPTUNE BEACH FL 32266-2547

3. Date Incorporated or Qualified **12/31/1986**	3a. Date of Last Report **07/12/1996**

2. Principal Place of Business 21	2a. Mailing Address 26	4. FEI Number **59-2886787**	Applied For / Not Applicable
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	5. Certificate of Status Desired ☐	**$8.75** Additional Fee Required
City & State 23	City & State 28	6. Election Campaign Financing Trust Fund Contribution ☐	**$5.00** May Be Added to Fees
Zip 24 / Country 25	Zip 29 / Country 30	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No	

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
SORRELL, MARY C 2275 ATLANTIC BLVD. NEPTUNE BEACH FL 32266	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City / 85 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 reinstating)   DATE

12. OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE **PTD** ☐ DELETE		1.1 TITLE	☐ Change ☐ Addition
NAME **HIONIDES, CHRIS**		1.2 NAME	
STREET ADDRESS **2275 ATLANTIC BLVD.**		1.3 STREET ADDRESS	
CITY-ST-ZIP **NEPTUNE BEACH FL 32266**		1.4 CITY-ST-ZIP	
TITLE **VD** ☐ DELETE		2.1 TITLE	☐ Change ☐ Addition
NAME **VERMEY, GERALD**		2.2 NAME	
STREET ADDRESS **422 SOUTH 3RD STREET**		2.3 STREET ADDRESS	
CITY-ST-ZIP **JACKSONVILLE BEACH FL 32250**		2.4 CITY-ST-ZIP	
TITLE **SD** ☐ DELETE		3.1 TITLE Vice-President/Dir.	☒ Change ☐ Addition
NAME **HIONIDES, NADIA**		3.2 NAME	
STREET ADDRESS **2275 ATLANTIC BLVD.**		3.3 STREET ADDRESS	
CITY-ST-ZIP **NEPTUNE BEACH FL 32266**		3.4 CITY-ST-ZIP	
TITLE ☐ DELETE		4.1 TITLE Secretary	☐ Change ☒ Addition
NAME		4.2 NAME Mary C. Sorrell	
STREET ADDRESS		4.3 STREET ADDRESS 2275 Atlantic Blvd.	
CITY-ST-ZIP		4.4 CITY-ST-ZIP Neptune Beach, FL 32266	
TITLE ☐ DELETE		5.1 TITLE	☐ Change ☐ Addition
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE ☐ DELETE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

CR2E037 (9/96)

14. I do 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 14 if changed, or on an attachment with an address.

SIGNATURE: _____ President   2/3/97   (904) 241-1501
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR   Date   Daytime Phone # 0007094