

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 **DOCUMENT # N19240**

1. Corporation Name

US

MARITANA COURT CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

3390 W MARITANA DR ST. PETERSBURG FL 33706-1011 Mailing Address

3390 W MARITANA DR SUITE 3 ST. PETERSBURG FL 33706-1011

FILED Mar 22, 1999 8:00 am Secretary of State

03-22-1999 90042 050 ****61.25



2. Principal Place of Business 21. 3390 W. MARITANA D. 26. 26.					3. Date Incorporated or Qualifed 02/13/1987			
	uite, Apt. #, etc. Suite, Apt. #, etc.				4. FEI Number	Appl	lied For	
22 27					59-2917128	Not	Applicable	
City & State City & State					5. Certificate of Status Desired	\$8.75 Ad		
23		28				Fee Req	<u> </u>	
Zip	Country	Zip	Country 30		6. Election Campaign Financing Trust Fund Contribution	\$5.00 M Added to	•	
	9. Name and Address of Current	<u></u>			10. Name and Address of New Registe	red Agent		
			81	Name				
GRANT, BARBARA M				82 Street Address (P.O. Box Number is Not Acceptable)				
				Street Address (F.O. Box Number is Not Acceptable)				
	3390 W MARITANA DR SUITE 3							
ST PETERSBURG BEACH FL 33706					<u> </u>	los Zin C		
			84	City		FL 85 Zip Co	Jud	
office or f	egistered agent, or both, in the State om familiar with, and accept the obligati	f Florida. Such change was au ons of, Section 617.0503, Flor	ithorized by ida Statutes	the corpo	corporation submits this statement for the purpos pration's board of directors. I hereby accept the a	appointment as regi	egistered istered	
	Signature, typed or printed name of registered agent			t signature re	equired when reinstating) DAT ADDITIONS/CHANGES TO OFFICER		2S IN 12	
12.	OFFICERS AND		13.			Change	Addition	
TITLE	PD	☐ DELETE	1.1 TITLE		P5 D	/ Apriange		
NAME	GRANT, BARBARA M		1.2 NAME					
STREET ADDRESS	3390 W MARITANA DR SUITE 3		1.3 STREE	- 1				
CITY-ST-ZIP	ST PETERSBURG BEACH FL 33		1.4 CITY-S	T-ZIP	JAN 1	Change	Addition	
TITLE	TD	DELETE	2.1 TITLE		BAYLEY, KENNETH 3390 W. MARITANA DR ST PETE BEAL, FL 33;	(24 wildings	E Addition	
NAME	KELLEY, NORMA		2.2 NAME	İ	DATE IN ARTHUR DR	, #·I		
STREET ADDRESS	3390 W MARITANA DR SUITE 5		2.3 STREE	ADDRESS	3390 00 17 180 11 18 33	71/		
CITY-ST-ZIP	ST PETERSBURG BEACH FL 33		2, 4 CITY-5	T-ZIP	SI TELE LLAT, FL 30		Addition	
TITLE .	D	☐ OELETE	3.1 TITLE	-		Change	☐ ¥aqqqqqq	
NAME	KELLEY, KENNETH H		3.2 NAME					
STREET ADDRESS	3390 W MARITANA DR SUITE 5	 -	3.3 STREE	ADDRESS				
CITY-ST-ZIP	ST PETERSBURG BEACH FL 33		3.4. CITY- S	T-ZIP		[T] Change	☐ Addition	
TITLE		☐ DELETE	4,1 TITLE			□ Cusude	☐ 400%OI	
NAME			4, 2 NAME	ì				
STREET ADDRESS				TADDRESS				
CITY-ST-ZIP			4.4 CITY-S	T-ZIP		CT Change	☐ Addition	
TITLE		☐ DELETE	5.1 TITLE			Change		
NAME			5.2 NAME					
STREET ADDRESS			5.3 STREE					
CITY-ST-ZIP			5.4 CITY-S	T-ZIP		F7.01	CT Address	
TITLE '		☐ DELETE	6.1 TITLE			. Change	Addition	
NAME			6.2 NAME					
STREET ADDRESS				FADDRESS				
CITY-ST-ZIP			6.4 CITY-S	T-ZIP				

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, with all other like empowered.

SIGNATURE:

CITY-ST-ZIP