

FILE NOW: FILING FEE IS \$61.25

FILED

Jan 27 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

1-27-97

B-

0839

C

DOCUMENT # N25656 (2)

1. Corporation Name

SEA ISLAND NORTH CONDOMINIUM III, INC.

Principal Place of Business

Mailing Address

770 ISLAND WAY
CLEARWATER FL 34630770 ISLAND WAY
CLEARWATER FL 34630-18433. Date Incorporated or Qualified
03/28/19883a. Date of Last Report
02/01/1996

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BARBER, CHARLES F.
611 DRUID STREET, SUITE 304
CLEARWATER FL 34616

81 Name

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

83

84 City

FL

85 Zip Code

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 PD
NAME KILLORAN, JAMES L.
STREET ADDRESS 770 ISLAND WAY #102
CITY-ST-ZIP CLEARWATER FL
☐ DELETE1.1 TITLE PD
1.2 NAME Raymond R. Brinson
1.3 STREET ADDRESS 770 Island Way N304
1.4 CITY-ST-ZIP Clearwater FL 34630
☒ Change ☐ AdditionTITLE VD
NAME SMITH, HERBERT S
STREET ADDRESS 770 ISLAND WAY
CITY-ST-ZIP CLEARWATER FL 32630-1823
☐ DELETE2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
☐ Change ☐ AdditionTITLE VD
NAME NASCHOLD, ERIC T
STREET ADDRESS 770 ISLAND WAY #103
CITY-ST-ZIP CLEARWATER FL 34630-1823
☐ DELETE3.1 TITLE VD
3.2 NAME Frank Akstin
3.3 STREET ADDRESS 770 Island Way N302
3.4 CITY-ST-ZIP Clearwater FL 34630
☒ Change ☐ AdditionTITLE TD
NAME CURRAN, MURIEL H
STREET ADDRESS 770 ISLAND WAY #201
CITY-ST-ZIP CLEARWATER FL 34630-1823
☐ DELETE4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
☐ Change ☐ AdditionTITLE SD
NAME SCHAUER, VINCENT A
STREET ADDRESS 770 ISLAND WAY #205
CITY-ST-ZIP CLEARWATER FL 34630-1823
☐ DELETE5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
☐ Change ☐ AdditionTITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
☐ Change ☐ Addition

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 13 if changed, or on an attachment with an address.

SIGNATURE: Raymond R. Brinson

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0067843

CR2E037 (9/96)