

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **N27085** (2)

1. Corporation Name

THE MARK CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

Mailing Address

C/O PROFESSIONAL BAYWAY MANAGEMENT COMPANY
5901 SUN BLVD. SUITE 203
ST. PETERSBURG FL 33715

C/O PROFESSIONAL BAYWAY MANAGEMENT COMPANY
5901 SUN BLVD. SUITE 203
ST. PETERSBURG FL 33715

3. Date Incorporated or Qualified
06/22/1988

3a. Date of Last Report
04/24/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

4. FEI Number
59-2904183

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

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

MCGUIRE, K. PAUL III
1507 KENWOOD AVENUE NORTH
ST. PETERSBURG FL 33734

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 street address

(NOTE: Registered Agent signature required when resigning)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS-CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☒ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
PENDLETON, BILL
722 PINELLAS BAYWAY, #108
TIERRA VERDE FL 33715

1.1 TITLE ☒ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
PD
PHIL BLUMER
5901 SUN BLVD SUITE 203
ST. PETERSBURG FL 33715

TITLE ☒ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
GARDNER, JOHN
722 PINELLAS BAYWAY, #107
TIERRA VERDE FL 33715

2.1 TITLE ☒ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
VD
BARBARA FOWKE
5901 SUN BLVD
ST. PETERSBURG FL 33715

TITLE ☒ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP
STD
JOEL, LARRY
722 PINELLAS BAYWAY, #101
TIERRA VERDE FL 33715

3.1 TITLE ☒ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
S.T.O.
GARY ORTHNER
5901 SUN BLVD SUITE 203
ST. PETERSBURG FL 33715

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP
600001758566
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*****61.25**
SG 3-26-96

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 119.07(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

1/16/96

8669115

3/22/96

864-0155

CR2E037 (12/95)