FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1998 **DOCUMENT #**

N35763

(4)

PALMA CEIA CONDOMINIUM ASSOCIATION, INC.											
Principal Place of Business Ma				Aalling Address				1	I SOUNIUM EUR ISKOL ONNI JEGIO ORION ISKU USUNJ K	HOFF DIRH DIGIL I	RICH BIBIA IODI
% FAREED OSSI 1810 S. MACDILL AVE. TAMPA FL 33629-5901				% FAREED OSSI 1810 S. MACDILL AVE. TAMPA FL 33629-5801			3. Date Incorporated or Qualified 12/21/1989 4. FEI Number Applied For				
									59-2992296		lot Applicable
2. Principal P		88	2e. Mailing Address 26			5.	Certificate of Status Desired	·	Additional Required		
Suite, Apt.	#, etc.			Suite, Apt. #, etc.			6. Election Campaign Financing \$5.00 May Be				
City & State				City & State			Trust Fund Contribution Added to Fees 7. Is this nonprofit corporation a homeowners association?				
23			28			Yes No					
Zip	Zip Country			Zip Coul				8. This corporation owes or has paid the current year Intangible			
24	9. Name and Address of Curren			9 30				Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent			
				area regant		81	Name		Marile and Address of them Hegisters	a rigain	
OSSI, FAREED						82	Street Addre	dress (P.O. Box Number is Not Acceptable)			
1810 S. MACDILL AVE. TAMPA FL 33629						83					
""						84	City	 .		las l Zin	Code
							·	FL 85 Zip Code			
11. Pursuant office or r agent. I a SIGNATURE	to the provision egistered agent m familiar with	ns of Sections 617.050 nt, or both, in the State , and accept the oblig	02 and 6 e of Florid pations of	17.1508, Florida Statu da. Such change was f, Section 617.0503, Fl	tes, the a authorize orida Stal	bove id by tutes	e-named corporations. the corporations.	oratior ion's b	n submits this statement for the purpose poard of directors. I hereby accept the a	of changing opointment a	its registered s registered
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered						d Age	ni eignature require				
12.	DP	OFFICERS AN	ID DIREC	TORS DELETE	13. 1.1 Ti	71.5		A	ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO Change	
NAME	OSSI, FAF	een			1.1 ()				•		
STREET ADDRESS 1810 S. MACDILL AVE.					124					L Olizinge	Addition
STREET ADDRESS					1.2 N 1.3 S	MME	ADDRESS			□ oneige	L_J Addition
STREET ADDRESS CITY-ST-ZIP	1810 S. M			_ been	1.3 S	MME	ADDRESS T-ZIP			Unanye	L Addition
	1810 S. M TAMPA FL D	IACDILL AVE. . , 33629		DELETE	1.3 S	ame Treet ITY-s				☐ Change	
CITY-ST-ZIP TITLE NAME	1810 S. M TAMPA FL D OSSI, ROI	IACDILL AVE. . , 33629 BERT			1.3 S 1.4 C 2.1 Ti 2.2 N	AME TREET ITY-S ITLE AME	T-ZIP				
CITY-ST-ZIP TITLE NAME STREET ADDRESS	1810 S. M TAMPA FL D OSSI, ROI 1810 S. M	IACDILL AVE, 33629 BERT IACDILL AVE.			1.3 S 1.4 C 2.1 Ti 2.2 N 2.3 S	AME TREET ITY-S ITLE AME TREET	T-ZIP ADDRESS				
CITY-ST-ZIP TITLE NAME	1810 S. M TAMPA FL D OSSI, ROI 1810 S. M	IACDILL AVE. . , 33629 BERT			1.3 S 1.4 C 2.1 Tl 2.2 N 2.3 S 2.4 C	TREET ITY-S ITLE AME TREET	T-ZIP ADDRESS			☐ Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	1810 S. M TAMPA FL D OSSI, ROI 1810 S. M TAMPA FL D	BERT IACDILL AVE.		⊠ DELETE	1.3 S 1.4 C 2.1 Ti 2.2 N 2.3 S	TREET ITY-S ITLE AME TREET CITY-S ITLE	T-ZIP ADDRESS				
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	1810 S. M TAMPA FL D OSSI, ROI 1810 S. M TAMPA FL D ROBBINS, 1903-B S.	JACDILL AVE. 33629 BERT JACDILL AVE. 33629 JEROME G. MACDILL AVE.		⊠ DELETE	1.3 S 1.4 C 2.1 Ti 2.2 N 2.3 S 2.4 C 3.1 Ti 3.2 N	AME TREET ITY-S ITLE AME TREET CITY-S ITLE AME	T-ZIP ADDRESS		* T.	☐ Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	1810 S. M TAMPA FL D OSSI, ROI 1810 S. M TAMPA FL D ROBBINS, 1903-B S.	BERT IACDILL AVE. . , 33629 JEROME G.		DELETE DELETE	1.3 Si 1.4 Ci 2.1 Ti 2.2 Ni 2.3 Si 2.4 Ci 3.1 Ti 3.2 Ni 3.3 Si	AME TREET ITY-S ITLE AME TREET CITY-S ITLE AME	T-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP		, , , , , , , , , , , , , , , , , , ,	Change	Addition Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	1810 S. M TAMPA FL D OSSI, ROI 1810 S. M TAMPA FL D ROBBINS, 1903-B S.	JACDILL AVE. 33629 BERT JACDILL AVE. 33629 JEROME G. MACDILL AVE.		⊠ DELETE	1.3 ST 1.4 CI 2.1 TI 2.2 NV 2.3 ST 2.4 CI 3.1 TI 3.2 NV 3.3 ST 3.4 CI 4.1 TI	TREET TITY-S TITLE TREET TREET TREET TREET TREET TREET TREET TREET TREET	ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP	ine	-C701	☐ Change	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	1810 S. M TAMPA FL D OSSI, ROI 1810 S. M TAMPA FL D ROBBINS, 1903-B S.	JACDILL AVE. 33629 BERT JACDILL AVE. 33629 JEROME G. MACDILL AVE.		DELETE DELETE	1.3 ST 1.4 CI 2.1 TI 2.2 NI 2.3 ST 2.4 CI 3.1 TI 3.2 NI 3.3 ST 3.4 CI 4.1 TI 4.2 NI 4.	TREET ITY-S ITLE TREET ITLE TREET ITLE AME ITREET ITLE ITREET ITLE ITREET ITLE ITLE ITLE ITLE ITLE ITLE ITLE I	ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP	ine:	-C701	Change	Addition Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	1810 S. M TAMPA FL D OSSI, ROI 1810 S. M TAMPA FL D ROBBINS, 1903-B S.	JACDILL AVE. 33629 BERT JACDILL AVE. 33629 JEROME G. MACDILL AVE.		DELETE DELETE	1.3 S' 1.4 CI 2.1 TI 2.2 NI 2.3 SI 2.4 CI 3.1 TI 3.2 NI 3.3 SI 3.4 CI 4.1 TI 4.2 NI 4.3 SI	TREET TITY-S TITLE TREET TITLE	ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP	(NE)	-C701	Change	Addition Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	1810 S. M TAMPA FL D OSSI, ROI 1810 S. M TAMPA FL D ROBBINS, 1903-B S.	JACDILL AVE. 33629 BERT JACDILL AVE. 33629 JEROME G. MACDILL AVE.		DELETE DELETE	1.3 S' 1.4 CI 2.1 TI 2.2 NI 2.3 SI 2.4 CI 3.1 TI 3.2 NI 3.3 SI 3.4 CI 4.1 TI 4.2 NI 4.3 SI	TREET ITY-S ITLE AME TREET	ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP	(NE (NO 703	, , , , , , , , , , , , , , , , , , ,	Change	Addition Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	1810 S. M TAMPA FL D OSSI, ROI 1810 S. M TAMPA FL D ROBBINS, 1903-B S.	JACDILL AVE. 33629 BERT JACDILL AVE. 33629 JEROME G. MACDILL AVE.		DELETE DELETE	1.3 S' 1.4 CI 2.1 TI 2.2 NI 2.3 S' 2.4 CI 3.1 TI 3.2 NI 3.3 SI 3.4 CI 4.1 TI 4.2 NI 4.3 SI 4.4 CI	AME TREET ITY-S ITLE AME TREET TILE AME TREET TREET TREET TREET TREET TREET TREET TREET	ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP	///E	-C701	☐ Change	Addition Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	1810 S. M TAMPA FL D OSSI, ROI 1810 S. M TAMPA FL D ROBBINS, 1903-B S.	JACDILL AVE. 33629 BERT JACDILL AVE. 33629 JEROME G. MACDILL AVE.		DELETE DELETE	1.3 S' 1.4 CC 2.1 TI 2.2 NA 2.3 ST 2.4 CC 3.1 TI 3.2 NA 3.3 ST 3.4 CC 4.1 TI 4.2 NA 4.3 ST 4.4 CC 5.1 TI 5.2 NA	AME TREET ITY-S ITLE AME TREET TLE AME TREET TLE TREET TLE TREET TREET TLE AME AME TREET TREET TLE AME	ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS ST-ZIP	//NE	-C701	☐ Change	Addition Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	1810 S. M TAMPA FL D OSSI, ROI 1810 S. M TAMPA FL D ROBBINS, 1903-B S.	JACDILL AVE. 33629 BERT JACDILL AVE. 33629 JEROME G. MACDILL AVE.		DELETE DELETE	1.3 S' 1.4 CC 2.1 TI 2.2 NA 2.3 ST 2.4 CC 3.1 TI 3.2 NA 3.3 ST 3.4 CC 4.1 TI 4.2 NA 4.3 ST 4.4 CC 5.1 TI 5.2 NA 5.3 ST 5.3 ST	AME TREET ITY-S ITLE AME TREET TLE AME TREET TLE TREET TLE TREET TREET TLE AME AME TREET TREET TLE AME	ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS T-ZIP	//NE (0) (0)	-C701	Change Change	Addition Addition Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS	1810 S. M TAMPA FL D OSSI, ROI 1810 S. M TAMPA FL D ROBBINS, 1903-B S.	JACDILL AVE. 33629 BERT JACDILL AVE. 33629 JEROME G. MACDILL AVE.		DELETE DELETE	1.3 S' 1.4 CC 2.1 TI 2.2 NA 2.3 ST 2.4 CC 3.1 TI 3.2 NA 3.3 ST 3.4 CC 4.1 TI 4.2 NA 4.3 ST 4.4 CC 5.1 TI 5.2 NA 5.3 ST 5.3 ST	TREET ITY-S'ITLE AME TREET	ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS T-ZIP ADDRESS T-ZIP	7/11/2 ? (~ () () () () () () () () ()	-C701	☐ Change	Addition Addition

CITY-ST-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.

SIGNATURE:

ETRE RECOGNIEDES!

1/21/98 (8/3) 254-6774

FILED

Apr 15 1998 8:00am

Secretary of State