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Apr 30 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # N36024 (0)

1. Corporation Name

STAHL CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

C/O ALAN R. STAHL
515 PAUL MORRIS DRIVE
ENGLEWOOD FL 34223

Mailing Address

C/O ALAN R. STAHL
515 PAUL MORRIS DRIVE
ENGLEWOOD FL 34223-3981

3. Date Incorporated or Qualified
01/05/1990

3a. Date of Last Report
05/01/1996

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

4. FEI Number

65-0259948

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

STAHL, R. ALAN
515 PAUL MORRIS DRIVE
ENGLEWOOD FL 34223

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

TITLE P ☐ DELETE

NAME STAHL, R. ALAN
STREET ADDRESS 6520 MANASOTA KEY ROAD
CITY-ST-ZIP ENGLEWOOD FL

TITLE SD ☐ DELETE

NAME STAHL, JUDY KAY
STREET ADDRESS 6520 MANASOTA KEY ROAD
CITY-ST-ZIP ENGLEWOOD FL

TITLE ST ☐ DELETE

NAME STAHL, JUDY KAY
STREET ADDRESS 6520 MANASOTA KEY ROAD
CITY-ST-ZIP ENGLEWOOD FL

TITLE D ☐ DELETE

NAME STAHL, R. ALAN
STREET ADDRESS 6520 MANASOTA KEY ROAD
CITY-ST-ZIP ENGLEWOOD FL

TITLE D ☐ DELETE

NAME STAHL, JUDY KAY
STREET ADDRESS 6520 MANASOTA KEY ROAD
CITY-ST-ZIP ENGLEWOOD FL

TITLE D ☒ DELETE

NAME HADNAGY, JAMES R.
STREET ADDRESS 4300 TIMBERLINE BLVD.
CITY-ST-ZIP VENICE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE P ☒ Change ☐ Addition

1.2 NAME STAHL, R. ALAN
1.3 STREET ADDRESS 1636 NEW POINT COMFORT RD.
1.4 CITY-ST-ZIP Englewood, FL 34223

2.1 TITLE VPSTO ☒ Change ☐ Addition

2.2 NAME STAHL, JUDY KAY
2.3 STREET ADDRESS 1636 NEW POINT COMFORT RD
2.4 CITY-ST-ZIP Englewood, FL 34223

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☒ Addition

6.2 NAME LOIS SCOTT
6.3 STREET ADDRESS 7529 CASTLEBERRY TERRACE
6.4 CITY-ST-ZIP Englewood, FL 34224

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: Judy Kay Stahl 4-1792 941-474-6289
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0082443

CR2E037 (9/96)