

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

APPROVED
AND
FILED

CORPORATION
ANNUAL REPORT
1995



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

95 APR 11 AM 9:14

DOCUMENT # N36323

(6)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

1. Corporation Name

NORTH BEACH VILLAGE II CONDOMINIUM ASSOCIATION,
INC.

000001454010

-04/12/95--01021--011

***130.00 ***130.00

DO NOT WRITE IN THIS SPACE

Principal Place of Business

Mailing Address

C/O WENDY MINTON
6250 HOLMES BLVD. #35
BRADENTON BEACH FL 34217-1663
US

C/O WENDY MINTON
6250 HOLMES BLVD. #35
HOLMES BEACH FL 34217
US

3. Date Incorporated or Qualified

01/23/1990

3a. Date of Last Report

04/22/1994

4. FEI Number

65-0173183

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 NORMA PETT

26

22 6250 Holmes Blvd #68

27 Suite, Apt. #, etc.

23 Holmes Beach

28 City & State

24 FI

25 USA

29 34217

Country

5. Certificate of Status Desired

☐

\$8.75 Additional

Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be

Added to Fees

7. Nonprofit with IRS 501(c)(3)

☒

\$68.75 Supplemental

Fee Not Required

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

MINTON, WENDY
6250 HOLMES BLVD.
#35
HOLMES BEACH FL 34217

81 Name

NORMA. PETT

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

6250 Holmes Blvd #68

83

Phone No. 813-778-1444

84 City

Holmes Beach FL

85 Zip Code

34217

11. Pursuant to the provisions of Sections 607.0502 and 607.1503, 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 607.0505, Florida Statutes.

SIGNATURE

NORMA PETT

(NOTE: Registered Agent signature required when resigning)

DATE

MAY 16 1995

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME MINTON, WENDY
STREET ADDRESS 6250 HOLMES BLVD. #35
CITY-ST-ZIP HOLMES BEACH FL

1.1 TITLE P.D.
1.2 NAME Lyle Gillespie
1.3 STREET ADDRESS 6250 Holmes Blvd #58
1.4 CITY-ST-ZIP Holmes Beach FL, 34217

TITLE SD
NAME KOZBELT, F. P.
STREET ADDRESS 6250 HOLMS BLVD., #35
CITY-ST-ZIP HOLMES BEACH FL

2.1 TITLE SD
2.2 NAME NORMA PETT
2.3 STREET ADDRESS 6250 Holmes Blvd #68
2.4 CITY-ST-ZIP Holmes Beach FLd. 34217

TITLE TD
NAME MARSICANO, CHARLES A.
STREET ADDRESS 6250 HOLMES BLVD., #35
CITY-ST-ZIP HOLMES BEACH FL

3.1 TITLE TD
3.2 NAME Bruce Viker
3.3 STREET ADDRESS 6250 Holmes Blvd #72
3.4 CITY-ST-ZIP Holmes Beach FLd. 34217

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 110.07(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: Bruce Viker

DATE: MAY 16 1995

813-778-5259