Mailing Address

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

FILED Feb 24, 1999 8:00 am Secretary of State

02-24-1999 90026 041 ****61.25

DOCUMENT	#	N384	438

1. Corporation Name

TORTUGA PLACE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

C/O JIM MAZ 11532 ANDY CAPTIVA FL 3	ROSSE LN. P O BOX 368	C/O JIM MAZZOTTA 11532 ANDY ROSSE LN. P CAPTIVA FL 33924	о вох	368					
2. Principal F	Place of Business	2a. Mailing Address				3. Date Incorporated or Qualifed 06/04/1990			
Suite, Apt.	#. etc.	Suite, Apt. #, etc.			_	4. FEI Number	_		oplied For
22	,	27				65-0211395			ot Applicable
City & Sta	te	City & State							Additional
23		28				5. Certifcate of Status Desired]	Fee Ro	equired
Zip	Country	Zip	Cou	intry		6. Election Campaign Financing		\$5.00	May Be
24	25		30			Trust Fund Contribution			to Fees
	9. Name and Address of Curr	ent Registered Agent				10. Name and Address of New Rec	istered A	\gent	
				81	Name				[
MAZZOTT 11532 AN	'A, JIM IDY ROSSE LN			82	Street Addres	ss (P.O. Box Number is Not Acceptable	∋)		
P.O. BOX	368	•		83					
CAPTIVA				84	City			85 Zip (Code
				"	Oity		FL	103 Zib	Sode
11. Pursuant office or agent. I a	to the provisions of Sections 617.0 registered agent, or both, in the Stal im familiar with, and accept the oblic	502 and 617.1508, Florida Statute le of Florida. Such change was au gations of, Section 617.0503, Flori	s, the al ithorized ida Stati	bove by to utes.	named corpor the corporation	ration submits this statement for the purice board of directors. I hereby accept the	rpose of one appoin	hanging its tment as re	registered gistered
SIGNATURE							DATE		
12.	Signature, typed or printed name of registered a	AND DIRECTORS	13.	Agent	signature required v	ADDITIONS/CHANGES TO OFFIC		DIRECTO	IRS IN 12
TITLE	PSD	DELETE	1.1 111	R F		ADDITIONS/OFFACES TO OFFICE	ENO AN	☐ Change	Addition
NAME	MAZZOTTA, JIM		1.2 NA						
STREET ADDRESS	9515 MY WAY LN				ADDRESS				
CITY-ST-ZIP	FT. MYERS FL		1.4 CII	-					1
TITLE	D	☐ DELETE	2.1 TIT		- 2112			Change	Addition
NAME	BABBIT: ERIC		2.2 NA		1 _	IM FREEMAN		Monango	
STREET ADDRESS	11532 ANDY ROSSE LN		1		ADDRESS				
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CITY-ST-ZIP	DT					ET.			
NAME			2.4 CI	ΠY-ST	T-ZIP		name digitima	Change	Addition
	T. '	☐ DELETE	3.1 TIT	TY-ST	r-ZIP		na nga Mgabianta .	Change	Addition
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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, with all other like empowered.

SIGNATURE: