## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

DOCUMENT # 1, Corporation Name



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

N48498

(2)

SEASIDE OF VERO BEACH HOMEOWNERS' ASSOCIATION, I, NC.

Principal Place of Business Mailing Address

FILED										
Mar	11	1997	8:00am							
Se	crei	tary o	f State							



P.O. BOX 4195 VERO BEACH F	FL 32964	P.O. BOX 4195 VERO BEACH FL 32964						
					3. Date Incorporated or Qualified 04/22/1992	3a. Date of Last R 03/18/19		
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number	I Ar	oplied For	
21		26			65-0486549	<del> </del>	ot Applicable	
Suite, Apt. #	#. elc.	Suite, Apt. #, etc.			The state of the s	¢g 75	Additional	
22		27			5. Certificate of Status Desired	Fee Re	equired	
City & State	3	City & State			<ol> <li>Election Campaign Financing         Trust Fund Contribution     </li> </ol>		May Be to Fees	
Zip	Country	Zip	Country	,	8. This corporation has liability for in	ntangible tax under s	. 199.032,	
24	25	29 30			Florida Statutes	Yes No		
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Registered Agent				
			81	Name			1	
ALLIK, DEBORAH			82	82 Street Address (P.O. Box Number is Not Acceptable)				
2260 SEASIDE STREET VERO BEACH FL 32963			83					
TENO D	EACHTE OLOGO		<u> </u>	<u> </u>				
!	•		84	'	***********		Code	
11. Pursuant t	o the provisions of Sections 617.0502	and 617.1508, Florida Statutes,	the above	e-named c	orporation submits this statement for the poration's board of directors. I hereby accep	urpose of changing if	ts registered	
agent. I ar	m familiar with and accept the obligat	tions of Section 217.0503, Florid	da Statute	у иле согра \$.	oration's board of directors, i riefeby accept	the appointment as	registered	
SIGNATURE	VIIIIIII				2/2	06/97		
SIGNATURE _	Signature typed or printed name of registered agen	t and title I applicable. (NOTE: R	legistered Age	ent signature re	equired when reinstating)	DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC	ERS AND DIRECTOR	RS IN 12	
TITLE	PD	☐ DELETE	1.1 TITLE			☐ Change	Addition	
NAME	BRUNO, LARRY		1.2 NAME					
STREET ADDRESS	2245 SEASIDE STREET		1.3 STREET	ADDRESS			ļi	
City-St-ZIP	VERO BEACH FL		1.4 Offy-5	ST-ZIP	<u> </u>			
TITLE	VD	☐ DELETE	2.1 TITLE			☐ Change	Addition C	
NAME	GIAMMANCO, JOHN		22 NAME					
STREET ADDRESS	2210 SEASIDE STREET		2.3 STREET	ADDRESS.	الماليان المستعدد المعطورة فوتين بتويوكيات استياست		Į.	
CITY-ST-ZIP	VERO BEACH FL 32963		2 4 CITY-	ST-ZIP				
TITLE	SD	☐ DELETE	3.1 TITLE			☐ Change	Addition	
NAME	ALLIK, DEBORAH		3.2 NAME	İ				
STREET ADDRESS	2260 SEASIDE STREET		3.3 STREET	ADDRESS				
CITY-ST-ZIP	VERO BEACH FL		3.4. C(TY-	ST-ZIP				
TITLE	D	XX DELETE	4.1 TITLE	D	James B. Sabonjohn	☐ Change	Addition	
NAME	SHAULIS, RAJU		4. 2 NAME	· ]	2235 Seaside St.			
STREET ADDRESS	2250 SEASIDE STREET		4.3 STREET	ADDRESS				
CITY-ST-ZIP	VERO BEACH FL		4.4 CITY-5	ST-ZIP	Vero Beach, Fla 3296	)3		
TITLE	D	☐ DELETE	5.1 TITLE	******	······································	Change	Addition	
NAME	MCCAFFREY, CHARLES G III		5.2 NAME					
STREET ADDRESS	14 EAST MALL PLAZA			ADORESS			1	
CITY-ST-ZIP	CARNEGIE PA 15243		5.4 CITY-5	1			ļ	
TITLE	T	DELETE	6.1 TITLE			☐ Change	Addition	
NAME	GIAMMANCO, MARIE		6.2 NAME	1				
STREET ADDRESS	2210 SEASIDE ST.		6.3 STREET	T AMORESS			ļ	
l !	VERO BEACH FL 32963							
CITY-ST-ZIP		with this files does not qualify	6.4 CITY-		ated in Section 110 07/3Vi) Florida Statuter	I further contifu that	tho	

I do nereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Fiorida 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 or an attachment with an address,

SIGNATURE: