


FILE NOW: FILING FEE IS \$61.25

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| NONPROFIT CORPORATION ANNUAL REPORT 1998 |  | FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS |
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DOCUMENT # **N50869** (9)
1. Corporation Name
333 BUILDING CONDOMINIUM ASSOCIATION, INC.

98 NOV -2 AM 8:32

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



REINSTATEMENT
09/14/1992

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| Principal Place of Business % RICHARD G. GEISINGER, JR. 2363 S.E. OCEAN BLVD. STUART FL 34996 | | Mailing Address % RICHARD G. GEISINGER, JR. 2363 S.E. OCEAN BLVD. STUART FL 34996 | |
| 2. Principal Place of Business 21 Lucy R. McCartney Suite, Apt. #, etc. 22 333 Tressler Drive City & State 23 Stuart, FL Zip 24 34994 | | 2a. Mailing Address 25 Ara Hatcher Suite, Apt. #, etc. 27 595 SE Nome Drive City & State 28 Port St. Lucie, FL Zip 29 34984 Country 30 St. Lucie | |
| 9. Name and Address of Current Registered Agent RIFKIN, AVRON G. 2400 S. FEDERAL HWY.- - 4TH FLOOR - STUART FL 34994- | | 10. Name and Address of New Registered Agent 81 Name Frederick G. Sundheim, Jr. 82 Street Address (P.O. Box Number is Not Acceptable) 310 SW Ocean Blvd. 83 84 City Stuart, FL 85 Zip Code 34994 | |

11. Pursuant to the provisions of Sections 617.0502 and 617.1503, 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 617.0503, Florida Statutes.

SIGNATURE *Frederick G. Sundheim, Jr.* (NOTE: Registered Agent signature required when reinstating) DATE **10/29/98**

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| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | DPS GEISINGER, RICHARD G, JR -2363 S.E. OCEAN BLVD.- -STUART FL- <input checked="" type="checkbox"/> DELETE | 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP | DPS Lucy R. McCartney 45 West High Point Rd. Stuart, FL 34996 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | T -GEISINGER, RICHARD G, JR -2363 S.E. OCEAN BLVD.- -STUART FL- <input checked="" type="checkbox"/> DELETE | 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP | T Lucy R. McCartney 45 West High Point Rd. Stuart, FL 34996 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D -GEISINGER, RICHARD G, SR -2363 S.E. OCEAN BLVD. -STUART FL- <input checked="" type="checkbox"/> DELETE | 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP | D Ron McCartney 45 West High Point Rd. Stuart, FL 34996 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | D RIFKIN, AVRON G.- 2400 S. FED. HWY. -STUART FL- <input checked="" type="checkbox"/> DELETE | 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP | D Ara Hatcher 595 SE Nome Dr. Port St. Lucie, FL 34984 <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> DELETE | 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| TITLE NAME STREET ADDRESS CITY-ST-ZIP | <input type="checkbox"/> DELETE | 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

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:

SIGNATURE
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-27-98 (561) 286-5573
Date Daytime Phone # 0072905

CR2E037 (10/97)