

FILE NOW: FILING FEE IS \$61.25

FILED  
Jun 16, 1999 8:00 am  
Secretary of State

06-16-1999 90016 019 \*\*\*\*61.25

0087094

NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # N94000000452

1. Corporation Name

GRAND BAY/LBK I ASSOCIATION, INC.

Principal Place of Business

3060 GRAND BAY BLVD. LONGBOAT KEY FL 34228

Mailing Address

3060 GRAND BAY BLVD. MANAGER'S OFFICE LONGBOAT KEY FL 34228



2. Principal Place of Business

2a. Mailing Address

3. Date incorporated or Qualified

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

01/28/1994

22 City & State

27 City & State

4. FEI Number

65-0609064

Applied For

Not Applicable

23 Zip

Country

28 Zip

Country

5. Certificate of Status Desired

\$8.75 Additional Fee Required

24

25

29

30

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PITCHFORD, MALCOLM BARNETT BANK CENTER 240 SOUTH PINEAPPLE AVENUE SARASOTA FL 34230

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD [ ] DELETE  
NAME ROSENTHAL, HENRY  
STREET ADDRESS 3060 GRAND BAY BLVD.  
CITY-ST-ZIP LONGBOAT KEY FL 34228

1.1 TITLE [ ] Change [ ] Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE VPD [ ] DELETE  
NAME EISON, IRVING  
STREET ADDRESS 3060 GRAND BAY BLVD.  
CITY-ST-ZIP LONGBOAT KEY FL 34228

2.1 TITLE [ ] Change [ ] Addition  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

TITLE TD [X] DELETE  
NAME OZOROFF, GARY  
STREET ADDRESS 3060 GRAND BAY BLVD.  
CITY-ST-ZIP LONGBOAT KEY FL 34228

3.1 TITLE TD [X] Change [ ] Addition  
3.2 NAME BORG REIMER  
3.3 STREET ADDRESS 3060 GRAND BAY BLVD  
3.4 CITY-ST-ZIP LONGBOAT KEY, FL 34228

TITLE SD [X] DELETE  
NAME TOPPEL, JOYCE  
STREET ADDRESS 3060 GRAND BAY BLVD.  
CITY-ST-ZIP LONGBOAT KEY FL 34228

4.1 TITLE SD [X] Change [ ] Addition  
4.2 NAME VALERIE GILL  
4.3 STREET ADDRESS 3060 GRAND BAY BLVD  
4.4 CITY-ST-ZIP LONGBOAT KEY, FL 34228

TITLE D [ ] DELETE  
NAME BERNSTEIN, JERRY  
STREET ADDRESS 3060 GRAND BAY BLVD.  
CITY-ST-ZIP LONGBOAT KEY FL 34228

5.1 TITLE [ ] Change [ ] Addition  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

TITLE [ ] DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE [ ] Change [ ] Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Borge Reimer 3-25-99 (441) 387-0159

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (1/98)