

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N94000005622 (5)

1. Corporation Name

OSPREY POINTE AT DOLPHIN CAY OWNER'S ASSOCIATION
, INC.



Principal Place of Business

4479 DOLPHIN CAY LANE SOUTH
ST. PETERSBURG FL 33711

Mailing Address

4479 DOLPHIN CAY LANE SOUTH
ST. PETERSBURG FL 33711

3. Date Incorporated or Qualified
11/14/1994

3a. Date of Last Report
02/17/1995

2. Principal Place of Business

21 10033 9th St. N.

Suite, Apt. #, etc.

22 2nd floor

City & State

23 St. Petersburg, FL

Zip

24 33716

Country

25 USA

2a. Mailing Address

26 10033 9th St. N.

Suite, Apt. #, etc.

27 2nd floor

City & State

28 St. Petersburg, FL

Zip

29 33716

Country

30 USA

4. FEI Number

59-3278867

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CHEEZEM, J. MICHAEL
2201 4TH ST. NORTH
SUITE 200
ST. PETERSBURG FL 33704

10. Name and Address of New Registered Agent

81 Name

Brian K. Smith

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

10033 9th St. North

83

2nd floor

84 City

St. Petersburg

FL

85 Zip Code

33716

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

Brian K. Smith

(NOTE: Registered Agent signature required when reappointing)

DATE

4-15-96

12. OFFICERS AND DIRECTORS

TITLE DP ☒ DELETE
NAME COOPER, GAIL M
STREET ADDRESS 2201 4TH ST. NORTH, STE. 200
CITY-ST-ZIP ST PETERSBURG FL 33704

TITLE DST ☒ DELETE
NAME BEAUMONT, SANDRA D
STREET ADDRESS 2201 4TH ST. NORTH, STE. 200
CITY-ST-ZIP ST PETERSBURG FL

TITLE D ☒ DELETE
NAME GAEBLER, MARYELLEN
STREET ADDRESS 2201 4TH ST. NORTH, STE. 200
CITY-ST-ZIP ST PETERSBURG FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D/P ☐ Change ☒ Addition
1.2 NAME BARRON, ADELE
1.3 STREET ADDRESS 4801 OSPREY DR. S.
1.4 CITY-ST-ZIP ST. PETERSBURG, FL 33711

2.1 TITLE D/VP ☐ Change ☒ Addition
2.2 NAME WILLIAMS, BEATRIZ
2.3 STREET ADDRESS 4830 OSPREY DRIVE S.
2.4 CITY-ST-ZIP ST. PETERSBURG, FL 33711

3.1 TITLE D/T ☐ Change ☒ Addition
3.2 NAME MAYSE, ROBERT
3.3 STREET ADDRESS 4850 OSPREY DR. S.
3.4 CITY-ST-ZIP ST. PETERSBURG, FL 33711

4.1 TITLE D/S ☐ Change ☒ Addition
4.2 NAME DINGMAN, HARRY
4.3 STREET ADDRESS 4830 OSPREY DR. S.
4.4 CITY-ST-ZIP ST. PETERSBURG, FL 33711

5.1 TITLE D ☐ Change ☒ Addition
5.2 NAME BASTYR, DENNIS
5.3 STREET ADDRESS 4801 OSPREY DR. S.
5.4 CITY-ST-ZIP ST. PETERSBURG, FL 33711

6.1 TITLE D ☐ Change ☒ Addition
6.2 NAME LANDSTRA, ROBERT
6.3 STREET ADDRESS 4850 OSPREY DR. S.
6.4 CITY-ST-ZIP ST. PETERSBURG, FL 33711

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 119.07(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:

Adele M. Barron
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/29/96

Date

813-577-2200

Daytime Phone #

CR2E037 (12/95)