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NONPROFIT CORPORATION ANNUAL REPORT
1999

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

FILED
Mar 11, 1999 8:00 am
Secretary of State
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DOCUMENT # N95000000633

1. Corporation Name
OSPREY RESIDENTIAL DISTRICT ASSOCIATION, INC.

Principal Place of Business	Mailing Address
7380 MURRELL RD. 201 VIERA FL 32940	7380 MURRELL RD. 201 VIERA FL 32940

2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualifed 02/03/1995
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-3307461 ☐ Applied For ☐ Not Applicable
City & State 23	City & State 28	5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required
Zip / Country 24 / 25	Zip / Country 29 / 30	6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent

DECATOR, III JAY A
7380 MURRELL RD, 201
VIERA FL 32940

10. Name and Address of New Registered Agent

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 JAY A. DECATOR, III 3/3/99
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 DIRECTOR	
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD DICK, MICHAEL 7380 MURRELL RD, STE 201 VIERA FL 32940	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD MARTELL, PAUL 7380 MURRELL RD, 201 VIERA FL 32940	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D VALERIE ROE 7380 MURRELL RD STE 201 VIERA FL 32940	☑ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	☐ Change ☑ Addition D RAST, GERALD 7380 MURRELL RD Ste 201 VIERA FL 32940
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD JAY DECATOR 7380 MURRELL RD, STE 201 VIERA FL 32940	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	☐ Change ☐ Addition DECATOR, JAY
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S CEROW, JOAN 7380 MURRELL RD, STE 201 VIERA FL 32940	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D STEVENS, JEFFREY 7380 MURRELL RD, STE 201 VIERA FL 32940	☑ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	☐ Change ☑ Addition D DALE, Robert 7380 MURRELL RD Ste 201 VIERA FL 32940

CR2E037 (11/98)

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 JAY A. DECATOR, III 3/3/99 (407) 242-4200
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
PRESIDENT / DIRECTOR