

FILE NOW: FILING FEE IS \$61.25

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Mar 03 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. McRham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N95000002096 (4)**

1. Corporation Name

LAUDERDALE-BY-THE-SEA MAIN STREET, INC.



Principal Place of Business 4501 OCEAN DR. LAUDERDALE-BY-THE-SEA FL 33308	Mailing Address 4501 OCEAN DR. LAUDERDALE-BY-THE-SEA FL 33308
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3. Date Incorporated or Qualified 05/02/1995	
4. FEI Number 65-0582285	<input type="checkbox"/> Applied For <input checked="" type="checkbox"/> Not Applicable

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

9. Name and Address of Current Registered Agent ANDERSON, LOUIS C 224 COMMERCIAL BLVD. SUITE 310 LAUDERDALE-BY-THE-SEA FL 33308-4443	
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10. Name and Address of New Registered Agent	
81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD <input checked="" type="checkbox"/> DELETE	1.1 TITLE	President - Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	DAVID WESSELS	1.2 NAME	Caroline White
STREET ADDRESS	C/O 4501 OCEAN DR	1.3 STREET ADDRESS	4501 Ocean Dr.
CITY-ST-ZIP	LAUDERDALE-BY-THE-SEA FL	1.4 CITY-ST-ZIP	LATS FL 33308
TITLE	SD <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BUNNY HORTON	2.2 NAME	
STREET ADDRESS	C/O 4501 OCEAN DR	2.3 STREET ADDRESS	
CITY-ST-ZIP	LAUDERDALE-BY-THE-SEA FL	2.4 CITY-ST-ZIP	
TITLE	TD <input checked="" type="checkbox"/> DELETE	3.1 TITLE	Treasurer - Director <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	MICKAILUK, ROSA	3.2 NAME	Robert Ternien
STREET ADDRESS	C/O 4501 OCEAN DR.	3.3 STREET ADDRESS	4501 Ocean Dr.
CITY-ST-ZIP	LAUDERDALE-BY-THE-SEA FL	3.4 CITY-ST-ZIP	LATS FL 33308
TITLE	D <input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ALLAN GIBSON	4.2 NAME	
STREET ADDRESS	%4501 OCEAN DR.	4.3 STREET ADDRESS	
CITY-ST-ZIP	LAUDERDALE-BY-THE-SEA FL	4.4 CITY-ST-ZIP	
TITLE	VD <input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	FRENCH, ANNA MAE	5.2 NAME	
STREET ADDRESS	%4501 OCEAN DR.	5.3 STREET ADDRESS	
CITY-ST-ZIP	LAUDERDALE-BY-THE-SEA FL	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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.

SIGNATURE: _____ **2/4/98** **716-2728**

CR2E037 (10/97)