## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998

STREET ADORESS

CITY-ST-ZIP

DOCUMENT #

N9600000123 (7)

THE RICE CONDOMINIUM ASSOCIATION, INC.

Mailing Address Principal Place of Business 3508 CHERRY PAUM DRIVE 3508 CHERRY PALM DRIVE 3. Date Incorporated or Qualified TAMPA FL TAMPA FL 01/08/1996 4. FEI Number Applied For APPLIED FOR 59-351452 Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 5. Certificate of Status Desired Fee Required 26 Suite, Apt. #, etc. Suite, Apt. #, etc. \$5.00 May Be 6. Election Campaign Financing Trust Fund Contribution Added to Fees 22 27 City & State City & State 7. Is this nonprofit corporation a homeowners association? Yes 🗵 No 26 23 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes 29 30 24 25 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 KENYON, TED F Street Address (P.O. Box Number is Not Acceptable) 82 3508 CHERRY PALM DRIVE 83 TAMPA FL Zip Code 84 City 85 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Floride 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) Signature, typed or printed name of registered agont and title if applicable. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. Addition Change DELETE 1.1 TITLE TITLE RICE, DAWN 1.2 NAME NAME \$508 CHERRY PALM DRIVE 1.3 STREET ADDRESS STREET ADDRESS TAMPA FL 1.4 CITY-ST-ZIP CITY-ST-ZIP ☐ Change Addition DELÉTÉ VD 2.1 TITLE TITLE ACOSTA, STANLEY 2.2 NAME NAME \$508 CHERRY PALM DRIVE 2.3 STREET ADDRESS STREET ADDRESS TAMPA FL 2. 4 CITY-\$1-ZIP CITY-ST-ZIP ☐ DELETE Change Addition 3.1 TITLE TITLE RICE, DAVID P 3.2 NAME NAME **9508 CHERRY PALM DRIVE** 3.3 STREET ADDRESS STREET ADDRESS TAMPA FL CITY-\$1-2IP 3.4. CITY - ST-ZIP DELETÉ 4.1 TITLE Change Addition TITLE KENYON, TED F 4. 2 NAME NAME \$508 CHERRY PALM DRIVE 4.3 STREET ADDRESS STREET ADDRESS TAMPA FL 4.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 5.1 TITLE TITLE 5.2 NAME name STREET ADDRESS 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 6.1 TITLE TITLE 6.2 NAME NAME

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 it changed, or on an attachment with an address.

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

FILED

Jul 16 1998 8:00am

Secretary of State