NONPROFIT CORPORATION ANNUAL REPORT

1999



## FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## DOCUMENT # N96000002639

SIDE-BY-SIDE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

1234-112 RIDING ROCKS LANE PUNTA GORDA FL 33950

1234-112 RIDING ROCKS LANE PUNTA GORDA FL 33950

## **FILED** Jul 06, 1999 8:00 am Secretary of State

07-06-1999 90010 006 \*\*\*\*61.25

	54. J	

						·			
2. Principal P	lace of Business	2a. Mailing Address			3	. Date incorporated or Qualifed			
21 /234	RIDING ROCKS LAND	26 1234 RI	PINCI	laxes 4	me .	05/15/1996			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			4	FEI Number	•	Ap	plied For
22		27				<u>65-0673811</u>			ot Applicable
City & State	State City & State Colon FL  28 PUNTA GORDA FL		2 5	. Certificate of Status Desired	Ð	\$8.75 / Fee Re			
Zip Zip						. Election Campaign Financing		\$5.00	May Be
	950 25 USA	29 33950	30	USA	[ ]	Trust Fund Contribution		Added t	
	9. Name and Address of Current				10	. Name and Address of New	Registered /	\gent	
				81 Name	ani	H. REIFEIS			
FRENCH.	FRENCH, RICHARD B 82 Street Addre			Address (	P.O. Box Number is Not Accept	able)			
1234-112 RIDING ROCKS LANE			-34	RIDING ROCKS	LAN	<u> </u>			
	ORDA FL 33950			83	S	100 A			
				84 City	2,4.7	4 GORDA	FL	85 Zig (	3750
AA Dumuma	to the provisions of Sections 617.0502	and 817 1509 Florida Ste	tites the			a submite this statement for the	ourness of	hanging its	registered
_ office or n	egistered agent, or both, in the State of	i Flonda. Such Change wa	s aumonze	ка вуштв согра	ration's b	oard of directors. I hereby acce	pt the appoin	tment as re	gistered
agent. I a	m ramiliar with, and accept the congaud	ina di, decudir di r.usus, i	rionda Sta	itutes.		17/1	1/99		
SIGNATURE	Signature, typed or printed name of regustered against		TE: Registers	id Agent signature n	equired when	reinstating)	DATE		——-
12.	OFFICERS AND		13.			ADDITIONS/CHANGES TO OF	FICERS AN	DIRECTO	RS IN 12
TIDE	PD	☐ DELETE	137	TILE .	VD			Change	☐ Addition
NAME	FRENCH, RICHARD B		121	WE					
STREET ADDRESS	1234-112 RIDING ROCKS LANE		1.3 9	STREET ADDRESS					
CITY-ST-ZIP	PUNTA GORDA FL 33950		1.40	STY-ST-ZIP					
TITLE	TD	☐ DELETÉ	211	mle	5D			Change	☐ Addition
NAME	FRENCH, NANCY S		221	WAE		<del></del> .			ļ
STREET ADDRESS	1234-112 RIDING ROCKS LANE		2.3 STREET ADDRESS			l			
CITY-ST-ZP	PUNTA GORDA FL 33950		2.4	CITY-ST-ZIP					
TILE	VD	☐ DELETE	3.11	III.E	TD			Change	Addition
NAME	REIFEIS, CARL H		321	WE					
STREET ADDRESS	1234-112 RIDING ROCKS LANE		3.33	STREET ADDRESS					}
CITY-ST-ZP	PUNTA GORDA FL 33950	· · · · · · · · · · · · · · · · · · ·	3.4.	CITY-ST-ZIP		<u> </u>			
TITLE	SD	☐ DELETE		mle	PD			Change	Addition
NAME	REIFEIS, MARY E		12	NAME					
STREET ADDRESS	1234-112 RIDING ROCKS LANE		438	TREET ADDRESS					<u> </u>
CITY-ST-ZIP	PUNTA GORDA FL 33950	<u></u>		CITY-ST-ZIP					
πιε		☐ DELETÉ		TILE				Change	Addition
NAME			1	WE					į
STREET ADDRESS				STREET ADDRESS					}
CITY-ST-ZIP				TTY-ST-ZIP					ET 4.44W
TITLE		DELETE		TILE .				Change	Addition
NAME				WE					1
STREET ADDRESS				STREET ADDRESS					- 1
CITY-ST-ZIP			6.4 0	TY-ST-ZIP					

14. 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 suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under certify 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.