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

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # N96000003008 (7)

1400 BUILDING OWNER'S ASSOCIATION, INC.

FILED
Feb 03 1998 8:00am
Secretary of State

te Incorporated or Qualified	

Principal Place of Business Mailing Address					-				
1400 PALM BA				OO PALM BAY RD NE					3. Date Incorporated or Qualified
PALM BAY FL US	32905		PA US	LM BAY FL 32905					06/03/1996
03			US						4. FEI Number Applied For
									NOT APPLICABLE Not Applicable
2. Principal Place of Business 2a. Mailing Address									5. Certificate of Status Desired S8.75 Additional
Suite, Apt.	#. etc.		26	Suite, Apt. #, etc.					Fee Required
22	w) 0.01		27						6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
City & Stat	te			City & State					7. Is this nonprofit corporation a homeowners association?
23			28	28					☐ Yes 🗶 No
Zip	ļ.	Country		Zip Country			y		8. This corporation owes or has paid the current year intangible
24		5 ind Address of Curr		29 30					Personal Property Tax due June 30. Yes X No
	a. Maine e	ina Address of Cur	ent negis	tered Agent		81	T	Name	10. Name and Address of New Registered Agent
CMITU	MENNIN						L		
SMITH, I	LM BAY RD	ME				82	5	Street Addres	ss (P.O. Box Number is Not Acceptable)
	AY FL 32905					83			
						84	_	City	log 7. Oak
								•	FL 85 Zip Code
- 11. Pursuant office or r	to the provisio eaistered age	ns of Sections 617.0: nt, or both, in the Sta	502 and 6 te of Floric	17.1508, Florida Statu la. Such change was	utes, the	above	e-n v th	named corpor	ration submits this statement for the purpose of changing its registered in a board of directors. I hereby accept the appointment as registered
agent. I a	ım tamiliar with	, and accept the obl	igations of	, Section 617.0503, F	Torida S	tatutes	s	10 CO1 po. a.io.	To board of directors. Increase about the appointment as registered
SIGNATURE _	Ct								
12,	Signatura, typed or	r printed name of registered a CFF(CERS A			712 Hegisti		ent s	signature required	when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	VD			DELETE		TITLE			Change Addition
NAME	SMITH, H	UGH JR			1.2	2 NAME			
STREET ADDRESS		M BAY RD NE				STREET	( ADQ	DRESS	
CITY-ST-ZIP	PALM BAY	/ FL <sup>*</sup>				CITY-S		I .	
TITLE	PTD	.,		☐ DELETE	2.1	TITLE			☐ Change ☐ Addition
NAME	SMITH, KE	EVIN A			2.2	NAME			
STREET ADORESS	I see a see			2.3 ST		2.3 STREET ADDRESS		DRESS	
CITY - ST - ZIP	PALM BAY	/ FL			2.	4 CITY-S	ST-Z	ZIP	
TITLE	SD			L DELETE	3.1	TITLE			☐ Change ☐ Addition
NAME		OOKE, CONNIE			3.2	NAME			
STREET ADDRESS		M BAY RD NE			3.3	STREET	ADE	DRESS	
CITY-ST-ZIP	PALM BAY	/ FL			_	CITY-S	ST - Z	ZIP	
TITLE				☐ DELETE		TITLE			Change Addition
NAME						2 NAME			j
STREET ADDRESS						STREET		l l	
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TITLE				DELETE		TITLE			Change Addition
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STREET ADDRESS						STREET		1	İ
CITY-ST-ZIP TITLE				DELETE	_	CITY-SI	1 - Zi	IP	I Ohana I Assu-
NAME				T DECESE		TITLE			☐ Change ☐ Addition
STREET AODRESS						NAME		2000	
CITY-ST-ZIP						STREET			
	ertify that the i	nformation supplied	with this fil	ling does not qualify t		cny-st xempti			ection 119 07/3)(i) Florida Statutes 1 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 chapter, or on an attachment with an address.

407-728-9559