CITY-ST-ZIP

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENTOS STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name N97000002155 (6)

	STONE AT PALMER RAN ON, INC.	ICH NO. 8 CONDOMII						
Principal Pla	ce of Business	Mailing Address						
435 10TH AVE., W. 435 10TH AVE., W. PALMETTO FL 34221 PALMETTO FL 34221					3. Date Incorporated or Qualified 04/16/1997 4. FEI Number Applied For			
					65-6754685	Not Applicable		
21 26			iling Address		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
Sulte, Apt. #, etc. Suite, Apt. #, 6 22 27			tc.		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
City & State City & State					7. Is this nonprofit corporation a homeowners association?			
23		28				Yes No		
Zip 24	Country	Zip	Count	ry	8. This corporation owes or has p	aid the current year Intangible		
24	9. Name and Address of Co	29 urrent Registered Agent	30		Personal Property Tax due Jur 10. Name and Address of New F			
			8	1 Name				
KHRAN	ier, stephen l		L.		ondominium Manag	ement, Inc.		
	100, 1 TAMPA CITY CENTER	RIDG	8:	2 Street Add	ress (P.O. Box Number is Not Accept	oble) Street		
	FL 83601	- DDD-0-	8		<u> </u>	2) [[]		
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			8-	4 03.				
	0 -			5	arasota.	FL 85 Zip Code		
11. Pursuant	t to the provisions of Sections 617	7.0502 and 617.1508 prida	Statutes, the abo	ve-named corp	poration submits this statement for the tion's board of directors. I hereby acc	purpose of changing its registered		
agent. Li	am fan har with, and accept the	oligations of, Sector 6,7,05	03, Florida Statut	es. 🗾	tion's board or directors. I hereby acc	apt the appointment as registered		
SIGNATURE			h	7//	25/98			
40	Signature, lyped or printed name of registers		(NOTE: Registered A	gent signature requi		DATE		
12.	DP	S AND DIRECTORS DELE	13. TE 1.1 TITLE		ADDITIONS/CHANGES TO OFF			
NAME	MAPES, REED	UELC DELC	1.1 IIRLE 1.2 NAME			☐ Change ☐ Addition		
STREET ADDRESS	435 10TH AVE., W.			ET ADDRESS				
CITY-ST-ZIP	PALMETTO FL 34221							
TITLE	DV	DELE'	1.4 CITY- TE 2.1 TITLE			☐ Change ☐ Addition		
NAME	WHEALY, THOMAS		2.2 NAME	ľ		E change E redition		
STREET ADDRESS	248 PALL MALL ST.			T ADDRESS				
CITY-ST-ZIP	LONDON, ONTARIO NEA	. 5P6	2. 4 CITY			_		
TITLE	DST	DELE:			SEE ATTACHE	Change Addition		
NAME	SPRINKLE, THOMAS		3.2 NAME		CHI			
STREET ADORESS	§332 MCINTOSH		3.3 STREE	T ADDRESS				
CITY-ST-ZIP	SARASOTA FL 34238		3.4. CITY	-ST-ZIP				
TITLE		☐ DELET	TE 4.1 TITLE		TOP IT	Change Addition		
NAME			4. 2 NAM		SEL			
STREET ADDRESS			4.3 STREE	et address ₁	P			
CITY-ST-ZIP			2					
TITLE			4.4 CITY-	ST-ZIP				
		☐ DELET		ST-ZIP		Change Addition		
NAME		☐ DELET	TE 5.1 TITLE 5.2 NAME	ST-ZIP				
STREET ADDRESS		☐ DELET	TE 5.1 TITLE 5.2 NAME	ST-ZIP	·			
STREET ADDRESS CITY-ST-ZIP			TE 5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY-	ST-ZIP		Change Addition		
STREET ADDRESS CITY-ST-ZIP TITLE		☐ DELET	5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY- E 6.1 TITLE	ST-ZIP T ADDRESS ST-ZIP		Change Addition		
STREET ADDRESS CITY-ST-ZIP TITLE NAME			5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY- E 6.1 TITLE 6.2 NAME	ST-ZIP ET ADDRESS ST-ZIP		Change Addition		
STREET ADDRESS CITY-ST-ZIP TITLE			5.1 TITLE 5.2 NAME 5.3 STREE 5.4 CITY- E 6.1 TITLE 6.2 NAME	ST-ZIP T ADDRESS ST-ZIP	30000256 -07/14/98010 ***61.25	Change Addition		

6.4 CITY-ST-ZIP 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 rice ever 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 changes or on an attrehment with an address.

FILED

Jul 14 1998 8:00am

Secretary of State

P08	Pinestor	Page:					
<u> </u>	Manager	TEAM	Local Address '	•	Date Printed:	1/12/98	Code
P/D			Mr. Mark R. Caruso 8360 Wingate Drive #824 Sarasota, FL 34238	*			10
S/T/D			Mrs. Marion J. Coker 8360 Wingate Dr. #811 Sarasota, FL 34238				35
AS			Mr. P. Richard Clark 1801 Glengary St. Sarasota, FL 34231				50
AT			Mr. Paul R. Clark, Jr. 1801 Glengary St Sarasota FL 342	31			55

:

.