FILE NOW: FILING FEE AFTER MAY 1 IS \$550.00

PROFIT . CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of Secretary DIVISION OF CORPORATIONS

1997

DOCUMENT # 288654

(7)

COLONIAL RIDGE MAINTENANCE CORP

OCEAN RIDGE FL 33435-7001

CITY-ST-ZIP

								# 		
Principal Place of Business Mailing Address						n samerin stant færde in ira meint deter Eli	/1 B1011 0101/ 0/0	124 0 FD 11 0 1040 4	(101) tool	
306 EAST BOYNTON BEACH BLVD. BOYNTON BEACH FL 33435			306 EAST BOYNTON BEACH BLVD. BOYNTON BEACH FL 33435-3842							
							Date Incorporated or Qualified 01/14/1965		of Last Re 0/1996	port
2. Principal P	lace of Business	2a.	Mailing Address				4. FEI Number		Apr	olied For
21			26				59-6181722	59-6181722 Not Applicable		
Suite, Apt. #, etc.			Suite. Apt. #, etc.				5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State		28	City & State				Election Campaign Financing Trust Fund Contribution		\$5.00 i Added to	
Zip	Country		Zip	\vdash	untry		a. This corporation has liability for			199.032,
24	25	29		30			Florida Statutes		No	
g. Name and Address of Current Registered Agent							10. Name and Address of New Registered Agent			
GROMKO & PORTER, INC					81	Name		2241	10	
308 E. BOYNTON BEACH BLVD BOYNTON BEACH FL 33435					82	Street A	9000203419 Address (P.O. Box/y2774 19 39 Accini 19 33 - 027			
•					83		***165.00			
					84	- ,		FL	85 Zip C	
11. Pulsuant	to the provisions of Sections 607.05	02 and 6	07.1508, Florida Statu	ites, the a	above	e-named c	orporation submits this statement for the	purpose of c	hanging its	registered
11. Pulsuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.										
SIGNATURE (al Voiter)					11.	1190	•	
····	Signature, upod or printed name of registered a			TE: Register	ed Age	ent signature re	quired when reinstating)	DATE		
12.	OFFICERS A	ND DIREC		13.			ADDITIONS/CHANGES TO OFF			
TITLE	P CHARLES		☐ DELETE	1	TITLE	•	3	L	Change	Addition
NAME	TAIBI, CHARLES				NAME		METTA HALL			
STREET ADDRESS	5505 N.OCEAN BLVD.			1			5505 N. OCEAN BLUD			
CHY-ST-ZIP	OCEAN RIDGE FL		D SC STE		CITY S		OCEAN RIDGE, FLA 33	435	-	107.000
TITLE	\$		☐ DELETE		TITLE	١٠	>	L	Change	Addition
NAME	INGHAM, GRANT				NAME	1	CONNITE O'BRIEN			
STREET ADDRESS	5505 N. OCEAN BLVD.			2.3	STREET	ADDRESS	5505 N. BUEAN BLUD OCCAN REDGE FLAS	سيسوية ورودة		
CITY - ST - ZIP	OCEAN RIDGE FL 33435		T on the			ST-ZIP	GUAN REDGE FLA 3	3455	100	A 4 892
TITLE	LIANTE MADOADET O		☐ DELETE		TITLE		ROSEDT STRUCTK	L	Change	Addition
NAME	VALINE, MARGARET S			1	NAME		ROSERT SIDORIKUN 1505 NO OCEAN BLUN			
STREET ADDRESS	5505 N OCEAN BLVD			3.3	STREET	ADDRESS 🛰	3 A No 13	سريد ر		
CITY - ST - ZIP	OCEAN RIDGE FL 33435			_		ST-ZIP	OCEAN RINGE FLA 334			
TITLE	D		☐ DELETE	4.1	TITLE		<u>ን</u>	ı	Change	Addition
NAME	KNEHR, DOROTHY				NAME	-	SUSAN MOSE			
STREET ADDRESS	5505 N OCEAN BLVD			43	STREET	ADDRESS _	5305 NO CAE AN OLUD			
CITY+ST-7IP	OCEAN RIDGE FL 33435			44	CITY-S	IT-ZIP	OCEAN RINGE, THA 3:	435		ref .
TIFLE	D		DELETE	51	TITLE		λ	Ĺ] Change	Addition
NAME	MONAHAN, JOHN			52	NAME	ļ	DONALD SCHEPSKE			
STREET ADDRESS	5505 N. OCEAN BLVD.			5.3	STREET	ADDRESS .	5505 No CESAN BLAD OCEAN REDGE FLA 334	مسری		
CITY - ST - ZIP	OCEAN RIDGE FL 33435-70	01		5.4	CITY - S	ST-ZIP	OCEAN REDGE FLA 334	<u> </u>		
TITLE	D		☐ DELETE	61	TITLE				Change	☐ Addition
NAME	Burke, Alfred			6.2	NAME		·		ふじ	110
STREET ADORESS	5505 N. OCEAN BLVD.			5.3	STREET	ADDRESS		,	\mathcal{O} \mathfrak{d}	_/ <i>`</i>

6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filling 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address. SIGNATURE:

FILED

Feb 10 1997 8:00am

Secretary of State

- I ABBARO KIDDA KOHAN KOKAG DIKAN DIKAN DIBAN BIDAK BIDAK BIDAK BIDAK DIRAN DIBIN ABDA