

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Morhart
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 702723 (8)

1. Corporation Name

CRYSTAL COURT NO. 1, INC.

Principal Place of Business

**2514 HAYES STREET, APT. 4
HOLLYWOOD FL 33020**

Mailing Address

**2514 HAYES STREET, APT. 4
HOLLYWOOD FL 33020**



3. Date Incorporated or Qualified
07/21/1961

3a. Date of Last Report
02/03/1995

4. FEI Number

59-1161591

Applied For
Not Applicable

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MILLER, WALTER E.
2514 HAYES ST. #4
HOLLYWOOD FL 33020**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, 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 617.0503, Florida Statutes.

SIGNATURE

Walter E. Miller

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

2/16/96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME **P LEVAY, ANTON**
STREET ADDRESS **2516 HAYES ST.**
CITY-ST-ZIP **HOLLYWOOD FL**

1.1 TITLE ☐ Change ☒ Addition
1.2 NAME **D. John Williams APT 6**
1.3 STREET ADDRESS **2514 Hayes St**
1.4 CITY-ST-ZIP **Hollywood Fla. 33020**

TITLE ☐ DELETE
NAME **D MALEC, DOROTHY**
STREET ADDRESS **2514 HAYES STR, APT 2**
CITY-ST-ZIP **HOLLYWOOD FL**

2.1 TITLE ☐ Change ☒ Addition
2.2 NAME **D Vera Jurtzuck APT 10**
2.3 STREET ADDRESS **2514 Hayes St**
2.4 CITY-ST-ZIP **Hollywood Fl 33020**

TITLE ☐ DELETE
NAME **ST GRIMALDI, ETHEL**
STREET ADDRESS **2514 HAYES ST.**
CITY-ST-ZIP **HOLLYWOOD FL**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME **V MILER, IONA**
STREET ADDRESS **2514 HAYES ST.**
CITY-ST-ZIP **HOLLYWOOD FL**

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☒ DELETE
NAME **D MARTIN, CONNOLLY**
STREET ADDRESS **2516 HAYES STREET**
CITY-ST-ZIP **HOLLYWOOD FL**

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME **D KOHL, PETER**
STREET ADDRESS **2516 HAYES ST.**
CITY-ST-ZIP **HOLLYWOOD FL**

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Ethel Grimaldi
ETHEL GRIMALDI

Date

Daytime Phone #

2/16/96

CR2E037 (12/95)