

AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION ANNUAL REPORT 1998



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

FILED

98 OCT 16 PM 4:05

SECRETARY OF STATE



DOCUMENT # 704674 (1)

1. Corporation Name ANDOVER CIVIC ASSOCIATION, INC.

Principal Place of Business Mailing Address 1195 NW 203RD ST P O BOX 69-3435 MIAMI FL 33169 US

3. Date Incorporated or Qualified 08/17/1962

4. FEI Number 65-0196187 Applied For Not Applicable

2. Principal Place of Business 2a. Mailing Address 21. Suite, Apt. #, etc. 26. Suite, Apt. #, etc. 23. City & State 28. City & State 24. Zip 25. Country 29. Zip 30. Country

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No N/A

9. Name and Address of Current Registered Agent

JORDAN, ANNIE LOIS 1195 NW 203RD ST P O BOX 69-3435 MIAMI FL 33169

10. Name and Address of New Registered Agent

81 Name 200002669242-4 82 Street Address (P.O. Box Number is Not Acceptable) 01061-0114 83 200002669242-4 10/21/98-01061-0114 84 City 185 Zip Code 61.2FL 61.25

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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Table with 6 rows of officer/director information including names, titles, and addresses.

Table with 6 rows of additions/changes to officers and directors including names, titles, and addresses.

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 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: ANNIE LOIS JORDAN, Treas

ANNIE LOIS JORDAN 9/20/98 305-651-6920 Date Daytime Phone # or 305-223-5330

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