

**NONPROFIT
CORPORATION
ANNUAL REPORT
1999**


FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
Mar 16, 1999 8:00 am
Secretary of State

03-16-1999 90021 012 ****61.25

DOCUMENT # 709954

1. Corporation Name
WILEY CONDOMINIUM APTS., INC.

290117- 90032 - 11

Principal Place of Business
**1715 WILEY STREET
HOLLYWOOD FL 33020**

Mailing Address
**1715 WILEY ST
APT. 17
HOLLYWOOD FL 33020
US**



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21	Suite, Apt. #, etc.	26	Suite, Apt. #, etc.	4. FEI Number	Applied For
22	City & State	27	City & State	59-1202375	Not Applicable
23	Zip	28	Zip	5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required	
24	Country	29	Country	6. Election Campaign Financing ☐ \$5.00 May Be Added to Fees	
25		30			

**DECKER, JEAN H
1715 WILEY ST.
APT. 17
HOLLYWOOD FL 33020**

81 Name **GLADYS MONTICELLI**
82 Street Address (P.O. Box Number is Not Acceptable)
83 **1715 WILEY ST APT #15**
84 City **HOLLYWOOD** FL 85 Zip Code **33020**

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 of registered agent or person authorized to file if applicable

(NOTE: Registered Agent signature required when transferring)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D	11 TITLE	DIRECTOR ☐ Change ☒ Addition
NAME	FRANKIC, DOROTHY	12 NAME	DELGADO, DENIA
STREET ADDRESS	1718 WILEY ST, #14	13 STREET ADDRESS	1715 WILEY ST. APT #6
CITY-ST-ZIP	HOLLYWOOD FL	14 CITY-ST-ZIP	HOLLYWOOD FL 33020
TITLE	D	21 TITLE	PRESIDENT/TREASURER ☒ Change ☐ Addition
NAME	MONTICELLI, GLADYS	22 NAME	MONTICELLI, GLADYS
STREET ADDRESS	1719 WILEY ST, APT 15	23 STREET ADDRESS	1715 WILEY ST. APT #15
CITY-ST-ZIP	HOLLYWOOD FL	24 CITY-ST-ZIP	HOLLYWOOD, FL 33020
TITLE	PTD	31 TITLE	DIRECTOR ☐ Change ☒ Addition
NAME	DECKER, JEAN H	32 NAME	HERNANDEZ, TERESA
STREET ADDRESS	1715 WILEY ST., APT. 17	33 STREET ADDRESS	1715 WILEY ST. APT. #7
CITY-ST-ZIP	HOLLYWOOD FL	34 CITY-ST-ZIP	HOLLYWOOD, FL 33020
TITLE	D	41 TITLE	DIRECTOR ☐ Change ☒ Addition
NAME	SULLIVAN, PEGGY	42 NAME	SNYDER SCOTT
STREET ADDRESS	1719 WILEY ST, APT 16	43 STREET ADDRESS	1719 WILEY ST. APT #14
CITY-ST-ZIP	HOLLYWOOD FL	44 CITY-ST-ZIP	HOLLYWOOD, FL 33020
TITLE	DS	51 TITLE	SECRETARY ☐ Change ☒ Addition
NAME	MONTELLO, JEAN	52 NAME	GALACKI, BONI
STREET ADDRESS	1715 WILEY ST., APT. 8	53 STREET ADDRESS	1719 WILEY ST. APT #3
CITY-ST-ZIP	HOLLYWOOD FL	54 CITY-ST-ZIP	HOLLYWOOD, FL 33020
TITLE	V	61 TITLE	VICE-PRESIDENT ☐ Change ☒ Addition
NAME	MONTELLO, AL	62 NAME	REESE CRAIG E.
STREET ADDRESS	1715 WILEY ST, #8	63 STREET ADDRESS	P.O. BOX 22043 N/A
CITY-ST-ZIP	HOLLYWOOD FL	64 CITY-ST-ZIP	HOLLYWOOD FL 33022

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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)

GLADYS MONTICELLI (954) 921-5994
Date: 3/16/99