## FILE NOW: FILING FEE IS \$61.25 NONPROFIT ORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

DOCUMENT #

1. Corporation Name

1997

(5)

WHITTIER TOWERS APARTMENTS ASSOCIATION, INC.

## **FILED** Jun 23 1997 8:00am Secretary of State

TALLAHOSSEE, FLUMUA



Principal Place of Business Mailing Address							<b>8                                   </b>	
1439 SOUTH OCEAN BOULEVARD 1439 SOUTH OCEAN BOULEV POMPANO BEACH FL 33062 POMPANO BEACH FL 33062-7								
					3.	Date Incorporated or Qualified 01/03/1966	3a. Date of Last 05/28/1	
·	Place of Business	2a. Mailing Address			4. FEI Number			Applied For
21	W. ada	26						Not Applicable
Sulte, Apt.	F, OC.	Suite, Apt. #, etc.			5.	Certificate of Status Desired	11 '	Additional
City & State	Δ	City & State						Required
23		28			6. Election Campaign Financing \$5.00 May Be			
Zip				ntry		Trust Fund Contribution		d to Fees
24	25	<b>⊢</b> · ⊢	io	,	В.	This corporation has liability for in Florida Statutes	ntangible tax under Yes 🔲 No	s. 199.032,
<u></u>	9. Name and Address of Current		<u>- 1</u>		10. Name and Address of New Registered Agent			
				B1 Name			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
KAYE, R	ORFRT			Christine E. Ryan  82 Street Address (P.O. Box Number is Not Acceptable)				
1500 W. CYPRESS CREEK ROAD				B2 Street				
207				83	3493 Palladian Circle			
FT. LAUDERDALE FL 33309				-		1 m	3.1.4	
P1. UNU	DERIDALE PL 00009		Ī	84 City			85 Zij	o Code
11. Pursuant	to the provisions of Sections 617.0502	and 617 1509. Florida Statutos	the ab	200 00000	Dee:	rfield Beach	FL    33	3442
11. Pursuant to the provisions of Sections 617.0502 and 617.0502, 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 farthing with, and accept the obligations of, Section 617.0503, Florida Statutes.								
		ows of, Section 617.0503, Flori	da Statu	ites.	0	- 4	3/28/97	· 1
SIGNATURE .	Signature, Labed or printed name of registered ligent	end title if applicable (NOTE)	STINE	E E	e required when	MANAGER	DATE	
12.	OFFICERS AND	TTT 18 18 18 18 18 18 18 18 18 18 18 18 18	13.	rigorit signator		ADDITIONS/CHANGES TO OFFICE		DO IN 10
TITLE	PD	DELETE	1.1 TITL	F	D	ADDITION OF THE OFFICE	X Change	
NAME	MCDONALD, RUTH	<del>-</del>	1.2 NAN		P		gg_ onunge	
STREET ADDRESS	1439 S. OCEAN BLVD. #106			EET ADDRESS				
CITY-ST-ZIP	POMPANO BCH. FL.		1	-ST-ZIP				[ ]
TITLE	VD	DELETE	2 1 TITL		<del> </del>		Change	Addition
NAME	FINNEGAN, ROBERT	<b>—</b>	2.2 NAM				ور المالون كي	Addition
STREET ADDRESS	1439 S. OCEAN BLVD. #316							i
CITY-ST-ZIP	POMPANO BCH., FL 00000			EET ADDRESS	1			ŀ
TITLE	SD SD	DELETE	2. 4 UII 3.1 TITL	Y-ST-ZIP			Change	Addition
NAME	MASTRO, SARAH	<u> </u>	3.2 NAM					L. Addition
STREET ADDRESS	1439 S. OCEAN BLVD. #212			EET ADDRESS				ł
CITY-ST-ZIP	POMPANO BCH. FL							ļ
TITLE	1D	<b>K</b> DELETE	3.4. CII 4.1 TITL	Y-ST-ZIP	TD		X Change	Addition
NAME	KALOGRIDIS, MARY	22. 000.10	4.2 NAM			n. 0	MT purific	
STREET ADDRESS	1439 S. OCEAN BLVD. #116				John 1	Terry Connor	_	
CITY-ST-ZIP	POMPANO BEACH FL			EET ADDRESS	1439 8	6. Ocean Blvd. #10	9	
TITLE	D DENOTIFE	DELETE		-ST-ZIP	Pompar	no Beach, FL 3306	2	Addition
	PALMIERI, LOUIS		51 TITL				☐ Change	Addition
NAME STORES ADDRESS	1439 S. OCEAN BLVD #306		5.2 NAM			1		1
STREET ADDRESS			1	EET ADDRESS		$\sim 11$		Ì
CITY-ST-ZIP	POMPANO BEACH FL	Desert		'-ST-ZIP	ļ	/ 1/20 / Ol'		
TITLE	D COOTED BIOLIAND	☐ DELETE	6.1 TITL		PD	6-24-4	K1 Change	Addition
NAME	FOSTER, RICHARD		6.2 NAV			`راسي	_	<b>8</b> . 🖈
STREET ADDRESS	1439 S. OCEAN BLVD #208		6.3 STRE	EET ADDRESS		6	110 0-1	51.00
CITY-ST-ZIP	POMPANO BEACH FL		6.4 CITY	- ST- ZIP		<u> </u>	you are	161

14. I do 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 inchanged, or on an attacking the same address.