

FILE NOW: FILING FEE IS \$61.25

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Feb 12 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION  
ANNUAL REPORT  
1997



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

DOCUMENT # 712976 (0)  
1. Corporation Name  
CRYSTAL COURT MANOR NO. 7 CONDOMINIUM, INC.



Principal Place of Business Mailing Address  
1350 N 12TH COURT BLDG 7 HOLLYWOOD FL 33019 1350 N 12TH COURT BLDG 7 HOLLYWOOD FL 33019-3250

3. Date Incorporated or Qualified 06/22/1967 3a. Date of Last Report 02/14/1996

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21	26	59-2756548	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required
22	27	<input type="checkbox"/>	
City & State	City & State	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
23	28	<input type="checkbox"/>	
Zip	Country	29	30
24	25	29	30

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

ARTHUR, EDITH  
1350 NO 12 CT  
STE 5A  
HOLLYWOOD FL 33019

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P <input checked="" type="checkbox"/> DELETE	1.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	WOODS, DAVID	1.2 NAME	MORSCHA, ROY
STREET ADDRESS	1354 NORTH 12TH COURT	1.3 STREET ADDRESS	1350 NORTH 12TH CT
CITY-ST-ZIP	HOLLYWOOD FL	1.4 CITY-ST-ZIP	HOLLYWOOD, FL 33019
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	VD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BLASIO, JOSEPH D.	2.2 NAME	D, BLASIO, JOSEPH
STREET ADDRESS	1354 N. 12TH COURT	2.3 STREET ADDRESS	1354 NORTH 12TH CT.
CITY-ST-ZIP	HOLLYWOOD FL	2.4 CITY-ST-ZIP	HOLLYWOOD, FL 33019
TITLE	PTD <input type="checkbox"/> DELETE	3.1 TITLE	TD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ARTHUR, EDITH	3.2 NAME	ARTHUR, EDITH
STREET ADDRESS	1350 N. 12TH CT.	3.3 STREET ADDRESS	1350 NORTH 12TH CT
CITY-ST-ZIP	HOLLYWOOD FL	3.4 CITY-ST-ZIP	HOLLYWOOD FL 33019
TITLE	D <input checked="" type="checkbox"/> DELETE	4.1 TITLE	D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BELLEAU, LOORAINE	4.2 NAME	TIBERIO, FILLIPO
STREET ADDRESS	1350 NORTH 12TH COURT	4.3 STREET ADDRESS	1350 NORTH 12TH CT
CITY-ST-ZIP	HOLLYWOOD FL	4.4 CITY-ST-ZIP	HOLLYWOOD, FL 33019
TITLE	SD <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PELLEGRINI, CARMELLA	5.2 NAME	
STREET ADDRESS	1354 N 12TH CT	5.3 STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD FL	5.4 CITY-ST-ZIP	
TITLE	VP <input type="checkbox"/> DELETE	6.1 TITLE	PD <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GARGIULLO, JOSEPH	6.2 NAME	GARGIULLO, JOSEPH
STREET ADDRESS	1354 NORTH 12TH COURT	6.3 STREET ADDRESS	1354 NORTH 12TH COURT
CITY-ST-ZIP	HOLLYWOOD FL	6.4 CITY-ST-ZIP	HOLLYWOOD FL 33019

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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: EDITH ARTHUR FEB 7/97 954-9275469  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0023497

CP2E037 (9/96)