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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 **DOCUMENT** #

Corporation Name

(9)

FILED Mar 06 1998 8:00am Secretary of State

SINGER ISLAND CIVIC ASSOCIA	TION, INC.							
Principal Place of Business Mailing Address 1161 SINGER DRIVE 1161 SINGER DR RIVIERA BEACH FL 33404 RIVIERA BEACH US US		88			- 1 1001:11 10001 11060 11110 11061 01111 0011 01611 01		II DIQA DIQII ABDI	
		1 Singer dr Era Beach fl 33404			3. Date Incorporated or Qualified 08/25/1967 4. FEI Number			
2. Principal Place of Business	2a. Malling Address			Certificate of Status Desired		5 Additional Required		
Suite, Apt. #, etc. Suite, 27		uite, Apt. #, etc.			Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees		
City & State	City & State			7. Is this nonprofit corporation a homeowners association? Yes \(\subseteq \text{No} \)				
Zip Country	Zip	Country 30			This corporation owes or has paid the corporation owes or has paid the corporation.	Yes	Intangible No	
9. Name and Address of Curr	ent Registered Agent				10. Name and Address of New Registered	Agent		
			81	Name				
DONOVAN & BORDELEAU, P.A. 1201 US HWY ONE #205				ess (P.O. Box Number is Not Acceptable)				
NORTH PALM BCH FL 33408			63					
			1	City	FI	_ []	Zip Code	
 Pursuant to the provisions of Sections 617.0 office or registered agent, or both, in the Stagent. I am lamiliar with, and accept the obline. 	ite of Florida. Such chai	nge was authorized	d by t	the corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the ap	of changin pointment	g its registered as registered	
SIGNATURE Signature, typed or printed name of registered	event and title if explicable	(NOTE: Benistere	1 Aneni	t aignatura reguirs	ad when reinstating) DATE		 	
	OFFICERS AND DIRECTORS		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					

PD MICHAEL MERNS Change MAddition 5080 N.OCEAN DEIVE #36 DELETE. 1.1 TITLE TITLE 1.2 NAME RICE, BERNARD NAME 1.3 STREET ADDRESS 5420 N. OCEAN DR., SUITE 1404 STREET ADDRESS RIVIERA BEACH, FL 33404 RIMERA BCH. FL 1.4 CITY-ST-ZIP CITY-ST-ZIP DELETE TITLE 2.1 TITLE NAME WHITE, WILLIAM 22 NAME 400 NOICTH OCEAN DA #1101 1161 SINGER DR 2.3 STREET ADDRESS STREET ADDRESS RIVIERA BEACH FL 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE 3.1 TITLE TITLE ROSEN, MARTIN 3.2 NAME NAME 5200 N OCEAN DR #805 3.3 STREET ADDRESS STREET ADDRESS RIVIERA BCH FL 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE 4.1 TITLE TITLE BARZELAY, MARTIN 4. 2 NAME NAME 5070 N OCEAN DR., #6C 4.3 STREET ADDRESS STREET ADDRESS RIVIERA BEACH FL CITY-ST-ZIP 4.4 City-St-ZiP Addition DELETE ☐ Change 5.1 TITLE TITLE HILL, JOHN 5.2 NAME NAME 145 OCEAN AVE., #402 **5.3 STREET ADDRESS** STREET ADDRESS PALM BEACH SHORES FL 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change 61 TITLE TITLE LEVY, ABRAHAM 6.2 NAME NAME 5380 N OCEAN DRIVE, #19F 6.3 STREET ADDRESS STREET ADDRESS RIVIERA BEACH FL CITY-ST-ZIP

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: