## **FILE NOW: FILING FEE IS \$61.25**

**NONPROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # 715112**

1. Corporation Name

BUCKLEY TOWERS CONDOMINIUM, INC.

Principal Place of Busi	iness
1321 MIAMI GARDENS	DRIVE
MIAMI FL 33179	

2. Principal Place of Business

Suite, Apt. #, etc.

22

Mailing Address

2a. Mailing Address

Suite, Apt. #, etc.

26

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1321 MIAMI GARDENS DRIVE MIAMI FL 33179

## **FILED** Mar 02, 1999 8:00 am § Secretary of State

03-02-1999 90046 007 \*\*\*\*61.25



3. Date Incorporated or Qualifed

08/14/1968-

59-1223878

4. FEI Number

.2		1-1					A0.75
City & State	9	City & State				5. Certificate of Status Desired   \$8.75 Additional Fee Required	
Zip	Country		Žip	Country		*****	6. Election Campaign Financing S5.00 May Be
<b>╗</b> ¯¯	25	29	_	30	•		Trust Fund Contribution Added to Fees
[4]	9. Name and Address of Current			<del>,</del>			10. Name and Address of New Registered Agent
	Halle and Undines of Callett				81	Name	
							,
STEVEN A. FEIN, P.A.				82 Street Address (P.O. Box Number is Not Acceptable)			
930 SOUTH STATE ROAD 7			-	83			
PLANTATION FL 33317				03			
				I	84	City	85 Zip Code
							FL [1]
11. Pursuant	to the provisions of Sections 617.0502	and 61	7.1508, Florida Statute	s, the ab	ove	-named o	corporation submits this statement for the purpose of changing its registered
office or r	egistered agent, or both, in the State of m familiar with, and accept the obligation	Florida	i. Such change was au Section 617.0503. Flori	thonzed da Statu	by t ites.	ine corpo	oration's board of directors. I hereby accept the appointment as registered
-	m terrine. With one accept the obligant		,				
SIGNATURE	Signature, typed or printed name of registered agent a	and title if a	applicable. (NOTE: F	Registered /	Agent	signatura re	equired when reinstating) DATE
12.	OFFICERS AND	_	<u> </u>	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD		<b>₩</b> DELETE	1.1 TIT	LE		☐ ☐ Change ☐ Addition
NAME	CASASDO, HENRY			1.2 NA	ME		PEGGY STROKEL
ĺ	AND AIR MINNE OF DEFINE DE MOOF MEET TOWER		PEGGY STROKEL PEGGY STROKEL STREET ADDRESS 1351 NE MIAMI GARDENS DR. #1701 E				
STREET ADDRESS		221 11	ESI TOWEN				N. MIGHI BLH 33179
CITY-ST-ZIP	N MIAMI BCH FL 33179	_	DELETE	1,4 CIT 2,1 TIT		- Lif	<b>✓P</b>
TITLE	VP		₩ VELE IE				A A
NAME	GALLO, MARIA		_	2.2 NA		ſ	1351 NE MIAMI GANDONE DE 1415E
STREET ADDRESS	1351 NE MIAMI GARDENS DR. #	1221	E	2.3 STI	REET.		N. MIAMI BCH 33179
CITY-ST-ZIP	N MIAMI BCH FL 33179	,		2.4 CI	TY-51	1.41 1	
TITLE	VP		DELETE	3.1 TiT	ĽΕ		V P
NAME	RODER, GYULA			3.2 NA	ME		HARRIET LAUINE GARDENS DE 4606 E
STREET ADDRESS	AND A SECURITION OF THE PARTY O	1414	E	3.3 STI	REET	ADDRESS	DSI RE MINTEL STATE
CITY-ST-ZIP	N MIAMI BCH FL 33179			3.4. CF	TY-S1		N. MIÁMI BCH 33174
TITLE	S		<b>₩</b> DELETE	4.1 TIT			MARONA WEINBERGES MCChange Addition 1351 NG MIAMI GARDENS DIE #3166
NAME	COHEN, JOY		• =	4. 2 NA	WE		MARON GALDENS DR #3168
	AND AREA WALLE CARDENIA DD	1205	w				
STREET ADDRESS		1200	**	4.4 CIT		l l	N. MIAMI BCH 33179
CITY-ST-ZIP	NO MIAMI BCH FL 33179		<b>5</b> DELETE	5.1 TIT		-217	Change ☐ Addition
TITLE	LADUOGO FLICENE		garrene	5.2 NA		Į	-DED AMIR
NAME	LARUSSO, EUGENE					ADDRESS	I A A A A A A A A A A A A A A A A A A A
STREET ADDRESS		1521 E					N. MIRMIBCH 33179.
CITY-ST-ZIP	N MIAMI BCH. FL 33179			5.4 CIT		-ZIP	
TITLE	T		☐ DELETE	6.1 TIT		1	D □ Addition
NAME	WEINBERGER, MARSHA			6.2 NA	ME	ļ	CHRISTA SADIN
STREET ADDRESS	NE 18449 OLDDENG DD	ŧ316-E		6.3 ST	REET	ADDRESS	BOINE MIAMI GARDEN DR 12250
CITY-ST-ZIP	NOTH MIAMI BEACH FL 3317			6.4 CH	IY-SI	-200	N. MIGMI DUM 33177.
14. I hereby	certify that the information supplied with	this fill	ng does not qualify for	the exer	mptic	on stated	d 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:

Applied For

Not Applicable