

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 715588 (0)

1. Corporation Name

DEERFIELD BEACH GARDENS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

400 S.E. 10TH STREET
DEERFIELD BEACH FL 33441

Mailing Address

400 S.E. 10TH STREET
DEERFIELD BEACH FL 33441



100001817241

-05/13/96--01002--022

***7000715.50 70.00

3. Date Incorporated or Qualified

11/19/1968

3a. Date of Last Report

10/06/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CLARK, GEORGE
1040 SE 4TH AVE #126B
DEERFIELD BEACH FL 33441

81

Name

Richard A. Pagano

82

Street Address (P.O. Box Number is Not Acceptable)

1040 S.E. 4th Ave., #332 B

83

84

City

Deerfield Beach,

FL

85 Zip Code

33441

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

Richard A. Pagano
Signature, typed or printed name of registered agent and title if applicable

Richard A. Pagano
(NOTE: Registered Agent's signature required when re-stating)

4/15/96

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	DP	<input type="checkbox"/> DELETE
NAME	CLARK, GEORGE	
STREET ADDRESS	1040 SE 4TH AVE #126B	
CITY-ST-ZIP	DEERFIELD BEACH FL 33441	
TITLE	DV	<input checked="" type="checkbox"/> DELETE
NAME	MULE, ALBERT	
STREET ADDRESS	400 SE 10TH ST #110A	
CITY-ST-ZIP	DEERFIELD BEACH FL 33441	
TITLE	DS	<input type="checkbox"/> DELETE
NAME	WELBOURNE, ELIZABETH	
STREET ADDRESS	1040 SE 4TH AVE #120B	
CITY-ST-ZIP	DEERFIELD BEACH FL 33441	
TITLE	DT	<input type="checkbox"/> DELETE
NAME	PAGANO, RICHARD	
STREET ADDRESS	1040 SE 4TH AVE #332B	
CITY-ST-ZIP	DEERFIELD BEACH FL 33441	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	KING, JOSEPH	
STREET ADDRESS	400 SE 10TH ST #305A	
CITY-ST-ZIP	DEERFIELD BEACH FL 33441	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	TIMS, WILLIAM	
STREET ADDRESS	400 SE 10TH ST #107A	
CITY-ST-ZIP	DEERFIELD BEACH FL 33441	

1.1 TITLE	DP	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	Clark, Jr., George J.	
1.3 STREET ADDRESS	1040 S.E. 4th Ave., #126B	
1.4 CITY-ST-ZIP	Deerfield Beach, FL 33441	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.1 TITLE	DV	
2.2 NAME	King, Joseph P.	
2.3 STREET ADDRESS	400 S.E. 10th St., #305A	
2.4 CITY-ST-ZIP	Deerfield Beach, FL 33441	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.1 TITLE		
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE	DT	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	Pagano, Richard A.	
4.3 STREET ADDRESS	1040 S.E. 4th Ave., #332B	
4.4 CITY-ST-ZIP	Deerfield Beach, FL 33441	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.1 TITLE	D	
5.2 NAME	Tims, William R.	
5.3 STREET ADDRESS	400 S.E. 10th St., #107A	
5.4 CITY-ST-ZIP	Deerfield Beach, FL 33441	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.1 TITLE	D	
6.2 NAME	Carpani, Dominic	
6.3 STREET ADDRESS	400 S.E. 10th St., #301A	
6.4 CITY-ST-ZIP	Deerfield Beach, FL 33441	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Do Clark
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/15/96 (954) 427-5577

Date:

Daytime Phone #

CR2E037 (12/95)