NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

## **DOCUMENT # 715588**

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

## FILED May 10, 1999 8:00 am § Secretary of State

05-10-1999 90068 034 \*\*\*\*61.25

|--|--|--|

2. Principal Pl	lace of Business 2a. Mailing Address				Date Incorporated or Qualifed     11/19/1968			
E1	#	26   Suite, Apt. #, etc.				pplied For		
Suite, Apt. (	te, Apt. #, etc. Suite, Apt. #, etc.				TO 400070F	ot Applicable		
City & State					_ \$8.75	Additional		
¬ '	28				5 Contifered of Status Decired	equired		
Zip	Country	Zip	Count	ry	6. Election Campaign Financing \$5.00	May Be		
	25	29	30	•	Trust Fund Contribution Added to Fees			
:41	9. Name and Address of Current Registered Agent				10. Name and Address of New Registered Agent			
					6			
OLDDIEN OLODIA				DO Committee (DO Complete Property in Not Associable)				
O'BRIEN, GLORIA				82 Street Address (P.O. Box Number is Not Acceptable)				
1040 SE 4TH AVENUE, #321				83				
DEERFIEL	DEERFIELD BEACH FL 33441							
				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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE								
12.	OFFICERS AND		13.	goth olginatore	ADDITIONS/CHANGES TO OFFICERS AND DIRECT	ORS IN 12		
TITLE	DP STATE OF THE ST	☐ DELETE	1.1 TITLE	Ē	<b>▷</b> T	Addition		
NAME			1.2 NAM	E	OBRICH GIORIG	l		
	Ophical Oction			EET ADDRESS	10110	(		
STREET ADDRESS	1040 02 4111 712 # 0210		1.4 CITY		Deerficia Beh, F1 33441			
TITLE			2,1 TITLE		Change	☐ Addition		
			2.2 NAM			Ì		
NAME	AIDLINOIS, FRANKI			EET ADORES	se l			
STREET ADDRESS	1 400 OF 4111 1112, W 100 11				~			
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NAME	CART ATT, DOMINTO			EET ADDRES!	CARPANT DOMINIC 400 SE NOT ST 4 3000 A 301A	1		
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CITY-ST-ZIP	DELETE.		4.1 TITLE	-ST-ZIP	DS Change	Addition		
TITLE	101		4.1 IIIL		RUSSOMANO GERARA	_		
NAME	MILTON, BERKE			EET ADDRES	11 05 10th - 2017 A			
STREET ADDRESS	400 OL 4111 A1L, #200 A				Derfield Beh, Fl. 33441			
CITY-ST-ZIP	Macient Control of the Control of th		5.1 TITU	-ST-ZIP	Change	Addition		
TITLE			5.1 HILL 5.2 NAM					
NAME	CLARK, GEORGE J JR			- EET ADORES:	IOVANISCI, JEAN 323-B			
STREET ADDRESS	1040 3E 41H AVENUE, 120-D		5.4 CITY		Deenfield Beh, F1, 33441	1		
CITY-ST-ZIP	DEERFIELD DEACHT L 33441		6.1 TITL		Change	Addition		
ΠΠLE	D CONTENT OF IDEALS	Anerese	6.2 NAM	- F	PAGANO RICHARD			
NAME	COOKEY, CURRIER		g 2 9704	- FET ADVIDE D	PAGANO RICHARD SS 1040 SE 45 AUC 332-B	Į.		
,	1040 SE 4TH AVE, #133-B			-ST-ZIP	Deenfield Ach, FI 33441			
CITY-ST-ZIP	DEERFIELD BEACH FL 33441	this filing does not qualify fo			ted in Section 119.07(3)(i). Florida Statutes, I further certify that the	information		

I hereby certify that the information supplied with this filling 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, of on an attachment with all other like empowered.

**SIGNATURE:** 

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

(954) 491-292

Daytime Ph

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