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

**NONPROFIT** CORPORATION ANNUAL REPORT



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

1996

DOCUMENT # 716426

(2)

DAHIIA	GARDENS	CONDOMINIUM.	INC.
VALILIA	UATIDLING		1110

Principal Place of Business Mailing Address								1 400111 50001 313			HI TIDUT DEDE	
5041 W. OAKLAND PARK BLVD. 5041 W. OAKLAND PARK BLVI				RK RIVD								
	E LAKES FL 33313	• • • • •	ERDALE LAKES F									
								3. Date Incorporated 04/22/196			ite of Last 03/15/1	
2. Principal P	lace of Business	2a. Mail	ing Address					4. FEI Number			<del></del>	Applied For
21		26	The state of the s					59-137264	18			Not Applicable
Suite, Apt. #, etc.		Suit <b>27</b>	Suite, Apt. #, etc.				5. Certificate of Statu	us Desired			5 Additional Required	
City & State		Oity	City & Stale				6. Election Campaign Trust Fund Contril				00 May Be ed to Fees	
Zip Country		Zıp	Zip Country				8. This corporation has liability for intangible tax under s. 199.032,					
24 25		29		30	30			Florida Statutes				
	9. Name and Address of Curren	nt Registered	I Agent		04			10. Name and Addre	ess of New Re	gistered /	Agent	
					81	Name						
SELIGMAN, HARRY 5041 W OAKLAND PARK BLVD					82	Street .	Address	(P.O. Box Number is	Not Acceptable	9)		
	RDALE LAKES FL 33313				83							
					84	City				FL	85 Zı	ıp Code
11. Pursuant or registe	to the provisions of Sections 617.0502 red agent, or both, in the State of Florid	2 and 617.150	08, Florida Statute	s, the ab	OVE T	L. named co oration's	orporatic	n submits this statem	ent for the purp	ose of cha	inging its r	registered office
familiar w	ith, and accept the obligations of, Secti	ion 617.0503	, Florida Statutes.		00.p	0.00010	. 000.00	, a dotara. Thereby th	осорен о спро	THE COLUMN	registeree	a agent. Tam
SIGNATURE	Signature, typed or printed name of registered agont	and the if epolical	ile (NO	TE Registere	an <b>Ag</b> en	it signature r	required wh	ën renstaling)		DATE		
12.	OFFICERS AND	D DIRECTOR	s	13				ADDITIONS/CHAN	NGES TO OFFIC	DERS AND	DIRECTO	DRS IN 12
TITLE	D		DELETE	1.1	TITLE		STEL	LA SHEPPEC I W OTKLAND	7- DIREC	711	Change	Addition
NAME	CHECKELION, WILLIAM		• 1	1.2 NAME			504	1 W-OTHKLAND	PK BUY	a)		
STREET ADDRESS 5041 W OAKLAND PK BLVD					STREET	ADDRESS	LAUD	PUALE LAKE	1. FLA.	33/3		
City-St-ZiP	FT LAUDERDALE, FL 00000	~	E''Incresse		CITY-S	T-ZIP					¬	
THILE	D D		DELETE		TITLE					L	Change	Addition
	NAME JOHNSON, GEORGE			2 2 NAME								
STREET ADDRESS 5041 W. OAKLAND PK BLVD.				2 3 STREET								
TITLE	CITY-ST-ZIP FT. LAUDERDALE FL		DELETE	2 4 CITY 3 1 TITLE		ST - ZIP				г	Change	Addition
NAME				32 NAM						L	_ Change	LJ Addition
STREET ADDRESS 5041 W OAKLAND PK BLVD				3 3 STREET /		ADDRESS						
CITY-ST-ZIP	FT LAUDERDALE, FL 00000				CHY-S							
THILE	VPD		DELETE	_	TITLE						Change	Addition
NAME	SOHMER, SEYMOUR			4 2	NAME					_	_	
STREET ADDRESS	5041 W OAKLAND PK BLVD			4.3 3	STREET	ADDRESS						
CITY-ST-ZiP	FT LAUDERDALE, FL 00000			44	CITY-S	I - ZiP						
TITLE	ST		DELETE		TITLE			,		[	Change	Addition
NAME	LANGFELDER, MARTHA			521	NAME							
STREET ADDRESS	5041 W OAKLAND PK BLVD			53	STREET	ADDRESS						
CITY-ST-ZIP	FT LAUDERDALE, FL 00000			541	CITY - S	1 - 216						
TITLE			DELETE	61	TITLE						Change	Addition
NAME				621	NAME							
STREET ADDRESS				63	STREET	ADDRESS						
CITY-ST-ZIP				6.41	CITY - S	T - ZIP	<u> </u>					

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 of 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 12 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF INSINING OFFICER OR DIRECTOR

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