## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

717180

(4)

## PENTHOUSE HIGHLANDS ASSOCIATION, INC.

				_					
Principal Place of Business Mailing Address							E); 31811 <b>4</b> 19	II WIMIS KIKIO MI	### #### 1###
3100 S OCEAN BLVD A1A HIGHLAND BEACH FL 33487		3100 S OCEAN BLVD A1A HIGHLAND BEACH FL 33487-2504							
						3. Date Incorporated or Qualified 09/16/1969		te of Last R 03/04/19	
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number		Ap	plied For
21		26				59-1280362 Not Applicable			
Suite, Apt #	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired		\$8.75	
City & State		City & State						Fee Re	
City & State		City & State				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
<b>23</b> Zip	Country	28	Countr			<del></del>			
24	25	— ·         ⊢	0	,		This corporation has liability for in Florida Statutes		tax unders ∃No	. 199.032,
24]	9. Name and Address of Current		, <del>o</del> i			10. Name and Address of New Re			
			81	ī	Name				
MAGRATH, CAROL			<u> </u>						
	CEAN BLVD, APT 508		82 Street Ac			ss (P.O. Box Number is Not Acceptab	re)		
	ID BEACH FL 33487		83	3				· · · · · · · · · · · · · · · · · · ·	
, ID 11			<u> </u>	1	0:			[au] w	<u> </u>
			84	1	City		FL	85 Zip	Code
11. Pursuant to office or reagent. I ar	to the provisions of Sections 617.0502 egistered agent, or both, in the State in familiar with, and accept the obliga	2 and 617.1508, Florida Statutes of Florida. Such change was au Itions of, Section 617.0503, Flori	the about thorized b da Statute	ve- by (	named corporation	oration submits this statement for the pon's board of directors. I hereby accept	urpose of it the app	changing it ointment as	s registered registered
SIGNATURE _	Signature, typied or printed name of registered ager	ot and title if applicable (NOTE:	Registered Ad	neol	t signature require	d when reinstating)	DATE		
12.	OFFICERS AND		13.		t agratate require	ADDITIONS/CHANGES TO OFFIC		DIRECTOR	1S IN 12
TITLE	P	DELETE	1.1 TITLE 1.2 NAME 1.3 STREET /					Change	Addition
NAME	KREINBIHL, ARTHUR								
STREET ADDRESS	3100 S OCEAN BLVD #614				ADDRESS				
CITY-ST-ZIP	HIGHLAND BEACH FL		1.4 CITY		ì				
TITLE	VP	DELETE	2.1 TITLE					Change	Addition
NAME	PARASILILI, ANTHONY		22 NAME						
STREET ADDRESS	3100 S OCEAN BLVD #622		23 STREE	ET A	ADDAESS				
CITY-S1-ZIP	HIGHLAND BEACH FL		2 4 City	- ST	r-zip				
TITLE	S	DELETE	3.1 TITLE					Change	Addition
NAME	MCGRATH, CAROL		3.2 NAME	•					
STREET ADDRESS	3100 S OCEAN BLVD #508		3.3 STREE		DDRESS				
CITY-S1-ZIP	HIGHLAND BEACH FL		3.4. CITY	- \$1	í - ZIP				
TITLE	7	DELETE	4.1 TITLE		T			Change	Addition
NAME	VOLLMER, DAVID		4. 2 NAM	E					
STREET ADDRESS	3100 S OCEAN BLVD #114		4.3 STREE		ADDRESS				
CITY-ST-ZIP	HIGHLAND BEACH FL		4.4 CITY-		- ZIP				
TITLE	D	☐ DELETE	5.1 TITLE					Change	Addition
NAME	GAFFEY, PETER		5.2 NAME	Ξ					
STREET ADDRESS	3100 S OCEAN BLVD #404		5.3 STRE	ET A	ADDRESS				
CITY-ST-ZIP	HIGHLAND BEACH FL		5.4 CITY	-ST	- ZIP				
TITLE	D			3.1 TITLE				Change	Addition Addition
NAME	HANLON, DON		6.2 NAM	Ē		•			
STREET ADDRESS	3100 S OCEAN BLVD #314		6.3 STRE	ET A	ADDRESS				
CITY - ST - ZIP	HIGHLAND BCH FL		6.4 CITY	- ST	J- ZIP				

14. I do 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: SIGNATURE AND TYPED IN PRINTED NAME OF BIGNING

SQUATH CAROL B. MAGRATH - 01-14-97
BROWING OFFICER OR DIRECTOR DOUBLE DEVINE Phone # 0039532

E037 (9/96)

**FILED** 

Jan 27 1997 8:00am

Secretary of State