## **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 # 717768

(6)

MONTEREY HOUSE CONDOMINIUM, INC.

	· · · · · · · · · · · · · · · · · · ·					
Principal Place of Business Mailing Address						1 tomit immet timt todit indie deter bill diett dente diett diett bildt diett bildt filet.
3114 SOUTH OC HIGHLAND BEAC	CEAN BOULEVARD CH FL 33487		14 South Ocean Boulevard Ghland Beach Fl 33487-2509			
						3. Date Incorporated or Qualified 12/22/1969 3a. Date of Last Report 02/07/1996
`	lace of Business	2a. Mailing Address	า ั			4. FEI Number Applied For S9-139 1307 Not Applied by
Suite, Apt.	# oto	26 Suite Apt # etc				Trock of photographs
<b>—</b>	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired Fee Regulred
City & State	9	27   City & State			<del></del>	· · · · · · · · · · · · · · · · · · ·
23		28				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Соц	ntry		8. This corporation has liability for intangible tax under s. 199.032,
24	25	29	30			Florida Statutes
	9. Name and Address of Currer	nt Registered Agent			***************************************	10. Name and Address of New Registered Agent
				81	Name	e
CHAROS, THOMAS				82	Street	et Address (P.O. Box Number is Not Acceptable)
	UTH OCEAN BLVD	•	83			
HIGHLAN	ID BEACH FL 33487			63		
				84	City	FL 85 Zip Code
11. Pursuant t	to the provisions of Sections 617.050	)2 and 617 1508. Florida 5	Statutes, the at	nove	-named	d corporation submits this statement for the purpose of changing its registered
office or re	egistered agent, or both, in the State m familiar with, and accept the oblig	e of Florida. Such change i	was authorized	vd b	the con	orporation's board of directors. I hereby accept the appointment as registered
Ū	in tartillar with, and accept the oblig	ations of, Section 617.000	o, Florida Stat	utes	• •	
SIGNATURE _	Signature, typed or printed name of registered age	ent and title if applicable	(NOTE: Registered	Ager	nt signature	ure required when reinstaing) DATE
12.	OFFICERS AN	ID DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	P	☐ DELETI	1.1 111	L€		☐ Change ☐ Addition
NAME	CHAROS, THOMAS		1.2 NA	ME		
STREET ADDRESS	3114 S OCEAN BLVD 601		1.3 ST	REET	address	
CITY-ST-ZIP	HIGHLAND BCH FL		1.4 CI	TY - ST	i-ZIP	
TITLE	VD	☐ DELETI	£ 2.1 TIT	LE		Secretary Director (SD) & Change Addition
NAME	SCHWARTZMAN, THEODORE		2.2 NA	ME		
STREET ADDRESS	3114 SO. OCEAN BLVD #408	3	2.3 ST	REET	address	· · · · · · · · · · · · · · · · · · ·
C(TY-ST-ZIP	HIGHLAND BEACH FL 33487			2. 4 CITY - ST - ZIP		
TITLE	SD CONTRACTOR OF THE CONTRACTO					VD □ Change XI Addition
NAME	KING, ANDREW J.		3.2 NA			Cionei Mary
STREET ADDRESS	3114 SO. OCEAN BLVD. #60	0			ADDRESS	
CITY-ST-ZIP	HIGHLAND BEACH FL	DELETI	3.4. CI	******	T-ZIP	Highland Beach Fr. 33487
TITLE NAME	AT WILCOX, MARION	N DECEN	4.1 T() 4.2 N/			Detartin Dennis
	3114 SO. OCEAN BLVD #60/	)			4 DDDCCC	12 ml Sa Ocean Rhyt #704
STREET ADDRESS	HIGHLAND BEACH FL 33487	<b>.</b>			ADDRESS	Highland Beach FL 33487
CITY-ST-ZIP TITLE	T	DELETI	4.4 CIT E 5.1 TIT		- 212	Change Addition
NAME	GARDNER, BETTY		5.2 NA			
STREET ADDRESS	3114 SO. OCEAN BLVD. #60	11			ADDRESS	
CITY-ST-ZIP	HIGHLAND BEACH FL	•	5.4 CI			·
TITLE	A	DELETI			211	☐ Change ☐ Addition
NAME	MARSTED, JEANETTE		6.2 NA	ME		
STREET ADDRESS	3114 SO. OCEAN BLVD. #20	5			ADDRESS	S .
CITY-ST-ZIP	HIGHLAND BEACH FL	_	6.4 CF			
14. I do hereb	by certify that the information supplie	d with this filing does not	qualify for the	exer	mption s	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 copporation 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 phanged, or on an attachment with an address.						

SIGNATURE: Theod

NATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1/30/97

161-276-7145

**FILED** 

Feb 05 1997 8:00am

Secretary of State

- 1 | 1001|| 1000|| 100|| 100|| 100|| 100|| 100|| 100|| 100|| 100|| 100|| 100|| 100|| 100|| 100|| 100|| 100||