

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 06 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # 719326 (1)

1. Corporation Name
BEVERLY HILLS CONDOMINIUM NUMBER NINE, INC.



Principal Place of Business 5300 WASHINGTON ST O-129 HOLLYWOOD FL 33021 US	Mailing Address 5300 WASHINGTON ST O-129 HOLLYWOOD FL 33021 US	3. Date Incorporated or Qualified 09/16/1970
		4. FEI Number 59-2380656
		Applied For <input checked="" type="checkbox"/> Not Applicable

2. Principal Place of Business 21 5300 WASHINGTON ST Suite, Apt. #, etc. O-129 City & State HOLLYWOOD, Florida	2a. Mailing Address 26 5300 WASHINGTON ST Suite, Apt. #, etc. O-129 City & State HOLLYWOOD, FLA	5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
22 0-129	27 0-129	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
23 33021	28 33021	7. Is this nonprofit corporation a homeowners association? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
24 33021	29 33021	30
Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

9. Name and Address of Current Registered Agent BURBRIDGE, ANNE 5300 WASHINGTON ST HOLLYWOOD FL 33021	10. Name and Address of New Registered Agent
81 Name	82 Street Address (P.O. Box Number is Not Acceptable)
83	84 City
	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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD	NAME CHISENA, GERTEUDEN	1.1 TITLE D	1.2 NAME Sandra B. Mortigan
STREET ADDRESS 5300 WASHINGTON ST O-129	CITY-ST-ZIP HOLLYWOOD FL	1.3 STREET ADDRESS 5300 Washington St	1.4 CITY-ST-ZIP Hollywood FLA 33021
TITLE VPD	NAME SMITH, VIOLET F	2.1 TITLE D	2.2 NAME SMITH, VIOLET F
STREET ADDRESS 5300 WASHINGTON ST O-129	CITY-ST-ZIP HOLLYWOOD FL	2.3 STREET ADDRESS 5300 WASHINGTON ST	2.4 CITY-ST-ZIP HOLLYWOOD, FLA 33021
TITLE VPD	NAME BURG, JOCOBE	3.1 TITLE D	3.2 NAME ANGELA T. FASTING
STREET ADDRESS 5300 WASHINGTON ST., APT. 0-129	CITY-ST-ZIP HOLLYWOOD FL	3.3 STREET ADDRESS 5300 WASHINGTON ST	3.4 CITY-ST-ZIP HOLLYWOOD, FLA 33021
TITLE T	NAME ZUCKER, SUSAN	4.1 TITLE	4.2 NAME JESUS LARA
STREET ADDRESS 5300 WASHINGTON ST., APT. P-232	CITY-ST-ZIP HOLLYWOOD FL	4.3 STREET ADDRESS 5300 WASHINGTON ST	4.4 CITY-ST-ZIP HOLLYWOOD FLA 33021
TITLE D	NAME BURBRIDGE, ANNE	5.1 TITLE	5.2 NAME ANNE BURBRIDGE
STREET ADDRESS 5300 WASHINGTON ST APT O-321	CITY-ST-ZIP HOLLYWOOD FL	5.3 STREET ADDRESS 5300 WASHINGTON ST	5.4 CITY-ST-ZIP HOLLYWOOD, FLA 33021
TITLE	NAME	6.1 TITLE	6.2 NAME
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I 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: _____ DATE: 1-5-98 DAYTIME PHONE: 962-0420

CR2E037 (10/97)