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Mar 11 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # 720748 (3)

1. Corporation Name

MANSON CONDOMINIUM ASSOCIATION NO. 3, INC.

Principal Place of Business

10330 N MILITARY TRAIL
PALM BEACH GARDENS FL 33410

Mailing Address

10330 N MILITARY TRAIL
PALM BEACH GARDENS FL 33410-4670

3. Date Incorporated or Qualified
10/28/1971

3a. Date of Last Report
10/28/1996

2. Principal Place of Business

21 Suite, Apt. #, etc

22 City & State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

29

30

4. FEI Number

NOT APPLICABLE

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

SCHEFFEL, WARREN C.
10330 NORTH MILITARY TR
PALM BEACH GDNS FL 33410

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

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 reinstalling)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE
NAME EILER, F.
STREET ADDRESS 10330 N MILITARY TRAIL
CITY-ST-ZIP PALM BCH GRDNS FL

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE V ☐ DELETE
NAME ~~SCHEFFEL~~ *Steven F. Letts*
STREET ADDRESS 10330 N MILITARY TRAIL
CITY-ST-ZIP PALM BCH GRDNS FL

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE P ☐ DELETE
NAME SCHEFFEL, W.
STREET ADDRESS 10330 N MILITARY TRAIL
CITY-ST-ZIP PALM BCH GRDNS FL

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE D ☐ DELETE
NAME ~~SCHEFFEL~~ *Ruggan, Mary*
STREET ADDRESS 10330 N MILITARY TRAIL
CITY-ST-ZIP PALM BCH GRDNS FL

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE S ☐ DELETE
NAME DI GEORGIO, RICK
STREET ADDRESS 10330 N MILITARY TRAIL
CITY-ST-ZIP PALM BCH GRDNS FL

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE T ☐ DELETE
NAME BURKE, MICHAEL W
STREET ADDRESS 10330 N MILITARY TRAIL
CITY-ST-ZIP PALM BCH GRDNS FL 33410

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-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: *Scheffel Warren C.*

3/10/97 561-644-6933

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0040896

CR2E037 (9/96)