FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

Principal Place of Business

SOME OW SOTH AVE

(8)

Mailing Address

MANA CHI LOTTE AVE

PALM BEACH LEISUREVILLE SUMMERS LAKE APARTMENTS BUILDING NO. 1 CONDOMINIUM ASSOCIATION, INC.

BOYNTON BCH FL 33426-5339		BOYNTON BCH FL 33426-5339		3. Date incorporated or Qualified	
IS				06/25/1974	
100		00		4. FEI Number	Applied For
}				59 -6 600814	Not Applicable
2. Principal Place of Business		2e. Mailing Address 26		5. Certificate of Status Desired	\$8.75 Additional Fee Required
Suite, Apt. #, etc.		Suite, Apt. #, etc.		6. Election Campaign Financing	\$5.00 May Be
22		27		Trust Fund Contribution	Added to Fees
City & State		City & State		7. Is this nonprofit corporation a homeowners association?	
23		28		Yes No	
Zip	Country	Zip	Country	8. This corporation owes or has paid the curr	ent veer Intendible
24	26	29	30] Yes ☐ No
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent		
<u> </u>			81 Name	······································	- T
NATIONAL AT PRANCICAL				STERN, L. MARK	
MERILLAT, FRANCIS J.			82 Street Address (P.O. Box Number is Not Acceptable)		
2001 SW 13 AVE APT 111			83	2001 SW13HAVE A	or 2
BOYNTON BEACH FL 33426			189 /3	BOYNTIN BETT CH	
			84 City		85 Zip Code
<u>L</u>				FL	33426
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 Mark 4. Stern					
Signature, typed of printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE					
12.	OFFICERS AND	DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
TITLE	D	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	FAULISE, JOSEPH		1.2 NAME		i
STREET ADDRESS	2001 SW 13TH AVE, #104		1.3 STREET ADDRESS		
CITY-ST-ZIP	BOYNTON BEACH FL		1.4 City-ST-ZIP		
TOLE	0	DELETE	2.1 TITLE &	D-95459 (1/5)51	Change
NAME	RANDISH, VINCENT	_	2.2 NAME	KOBERTH, SNEDENER	
	2001 SW 13TH AVE #107		O A STOCKT ADDRESS	2001 SW 13 HVE	Ror 5
STREET ADDRESS			2.3 STREET ADDRESS	ROBERTA, SNEDENER 2001 SW 13 AVE BOYNTINBEACH, FIA	7
CITY-ST-ZIP	BOYNTON BEACH FL	DELETE	2. 4 CITY-ST-ZIP		Change
j	•	A DECEDE	3.1 HILE	STERN, L. MARK	Parama Provided
NAME	MERILLAT, FRANCIS J		32 NAME	STERN, L. MARK 2001 SW 13 HAVE APT	2
STREET ADDRESS	2001 S W 13TH AVE APT111		3.5 OTTACE PRODUCTS	BOYNTON BEACH. FL.	
CITY-ST-ZIP	BOYNTON BEACH FL				- A
TITLE	VPD	☐ DELETE	4.1 TITLE		Change Addition
NAME	JONES, DONALD C		4. 2 NAME		
STREET ADDRESS	2001 SW 13TH AVE., #103		4.3 STREET ADDRESS		
CITY-ST-ZIP	BOYNTON BEACH FL		4.4 CITY - ST - ZIP		
TITLE	SO	☐ DELETE	5.1 TITLE		☐ Change ☐ Addition
NAME	JONES, ELEANOR L.		5.2 NAME		
STREET ADDRESS	2088 SW 13TH WAY		5.3 STREET ADDRESS		
CITY-ST-ZIP	BOYNTON BEACH FL		5.4 CITY-ST-ZIP		
TITLE	PD	DELETE	6.1 TITLE		☐ Change ☐ Addition
, I	TU	occo, c	W. I TITAL		

STREET ADDRESS

CITY-ST-ZIP

FAULISE, JUDITH M.

2001 SW 13 AVE 104

6.2 NAME

6.3 STREET ADDRESS

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.

FILED

Mar 06 1998 8:00am

Secretary of State