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03-06-1999 90097 026 ****61.25

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**NONPROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 730052

1. Corporation Name

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

Principal Place of Business

2001 SW 13TH AVE
BOYNTON BCH FL 33426-5339
US

Mailing Address

2001 SW 13TH AVE
BOYNTON BCH FL 33426-5339
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

29 Zip

30 Country

3. Date Incorporated or Qualified

06/25/1974

4. FEI Number

59-6600814

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

**STERN, MARK L.
2001 SW 13TH AVENUE
APT 2
BOYNTON BEACH FL 33426**

10. Name and Address of New Registered Agent

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

Mark L. Stern

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

2/10/99

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME **D FAULISE, JOSEPH**
STREET ADDRESS **2001 SW 13TH AVE, #104**
CITY-ST-ZIP **BOYNTON BEACH FL**

TITLE ☐ DELETE

NAME **D SNEDEBER, ROBERTA**
STREET ADDRESS **2001 SW 13TH AVENUE APT 5**
CITY-ST-ZIP **BOYNTON BEACH FL**

TITLE ☐ DELETE

NAME **TD STERN, MARK L.**
STREET ADDRESS **2001 SW 13TH AVENUE APT 2**
CITY-ST-ZIP **BOYNTON BEACH FL**

TITLE ☐ DELETE

NAME **VPD JONES, DONALD C**
STREET ADDRESS **2001 SW 13TH AVE., #103**
CITY-ST-ZIP **BOYNTON BEACH FL**

TITLE ☐ DELETE

NAME **SD JONES, ELEANOR L.**
STREET ADDRESS **2088 SW 13TH WAY**
CITY-ST-ZIP **BOYNTON BEACH FL**

TITLE ☐ DELETE

NAME **PD FAULISE, JUDITH M.**
STREET ADDRESS **2001 SW 13 AVE 104**
CITY-ST-ZIP **BOYNTON BEACH FL**

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

SNEDEBER

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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

2/10/99

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)