

FILE NOW: FILING FEE IS \$61.25

FILED
Mar 18 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 730839 (8)
1. Corporation Name
NAUTILUS OF HOLLYWOOD CONDOMINIUM ASSOCIATION, I NC.



Principal Place of Business 1500 SOUTH SURF ROAD #18 HOLLYWOOD BEACH FL 33019-2373	Mailing Address 1500 SOUTH SURF ROAD #18 HOLLYWOOD BEACH FL 33019-2373
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3. Date Incorporated or Qualified
09/26/1974

4. FEI Number
59-1756620

Applied For	Not Applicable
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2. Principal Place of Business 21 c/o Miami Management Suite, Apt. #, etc. 22 1189 Sawgrass Corp. Pkwy	2a. Mailing Address 26 c/o Miami Management Suite, Apt. #, etc. 27 1189 Sawgrass Corp. Pkwy
23 Sunrise, FL 33323	28 Sunrise, FL 33323
24 Zip	25 Country
29 Zip	30 Country

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

7. Is this nonprofit corporation a homeowners association?
 Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
 Yes No

9. Name and Address of Current Registered Agent

**KAPLAN, DOUGLAS C.
2435 HOLLYWOOD BLVD.
HOLLYWOOD FL 33020**

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	TD	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HESSLER, JEFFREY	1.2 NAME	
STREET ADDRESS	1500 S SURF ROAD #1	1.3 STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD FL	1.4 CITY-ST-ZIP	
TITLE	VPD	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GRUMBERG, KATIA	2.2 NAME	
STREET ADDRESS	1500 S SURF ROAD #17	2.3 STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD FL	2.4 CITY-ST-ZIP	
TITLE	PD	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GODOY, GUS	3.2 NAME	
STREET ADDRESS	137411 SW 71 LANE	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL	3.4 CITY-ST-ZIP	
TITLE	SD	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	BENJET, ROSALYN	4.2 NAME	
STREET ADDRESS	1500 S SURF ROAD #11	4.3 STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD FL	4.4 CITY-ST-ZIP	
TITLE	S	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	COLLINS, LIZ	5.2 NAME	
STREET ADDRESS	1500 SOUTH SURF ROAD	5.3 STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD BEACH FL 33019-2373	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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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: *Rosalyn Benjet* 3-5-98

CR2E037 (10/97)