

**FILE NOW: FILING FEE IS \$61.25**

**FILED**  
**Jun 20 1997 8:00am**  
**Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT <b>1997</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra S. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT #** 730850  
 1. Corporation Name  
**ORIOLE GARDENS CONDOMINIUM THREE ASSOCIATION, INC.**

Principal Place of Business	Mailing Address
7400 NW 1st STREET MARGATE, FLA. 33063	7400 N.W. 1st STREET MARGATE, FLA. 33063

<b>2.</b> Principal Place of Business	<b>2a.</b> Mailing Address
<b>21</b> Suite, Apt #, etc.	<b>26</b> Suite, Apt. #, etc.
<b>22</b> City & State	<b>27</b> City & State
<b>23</b> Zip	<b>28</b> Zip
<b>24</b> Country	<b>29</b> Country
<b>25</b>	<b>30</b>

<b>3.</b> Date Incorporated or Qualified	<b>3a.</b> Date of Last Report
9/30/74	
<b>4.</b> FEI Number	Applied For
59-1579420	Not Applicable
<b>5.</b> Certificate of Status Desired	<input type="checkbox"/> \$8.75 Additional Fee Required
<b>6.</b> Election Campaign Financing Trust Fund Contribution	<input type="checkbox"/> \$5.00 May Be Added to Fees
<b>6.</b> This corporation has liability for intangible tax under s. 199.032, Florida Statutes	<input type="checkbox"/> Yes <input type="checkbox"/> No

**9. Name and Address of Current Registered Agent**

BROSS, ARTHUR J. LPM  
 7400 N.W. 1st STREET  
 MARGATE, FLA. 33063

**10. Name and Address of New Registered Agent**

<b>81</b> Name
<b>82</b> Street Address (P.O. Box Number is Not Acceptable)
<b>83</b>
<b>84</b> City
<b>85</b> Zip Code

FL

**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**

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE
PD	PINCUS, MAX	7500 N.W. 1st MARGATE	MARGATE, FLA. 33063	
VPD	LIVENT, JACK	371 N.W. 76 AVE.	MARGATE, FLA. 33063	
VPD	LEVINE, NAT	7400 N.W. 1st STREET	MARGATE, FLA. 33063	
VPD	TENDLER, AL	201 N.W. 76th AVENUE	MARGATE, FLA. 33063	
T	ZARCHAN, SYD	101 N.W. 76th AVENUE	MARGATE, FLA. 33063	
P	PINCUS, MAX	7500 N.W. 1st STREET	MARGATE, FLA. 33063	

**13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12**

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

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**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:** \_\_\_\_\_ **DATE:** 6/16/97 **DAY/TIME PHONE #:** 971-2590

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (9/96)