

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

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # 731301 (8)

1. Corporation Name  
**LYNDHURST "D" CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business: C/O HELBIG, LYNDHURST D 85, DEERFIELD BEACH FL 33441  
Mailing Address: C/O HELBIG, LYNDHURST D 85, DEERFIELD BEACH FL 33441

3. Date Incorporated or Qualified: 12/03/1974  
3a. Date of Last Report: 05/01/1995  
4. FEI Number: 59-1916387  
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

2. Principal Place of Business (21-24) and 2a. Mailing Address (26-30) fields with sub-headers for Suite, Apt. #, etc., City & State, Zip, and Country.

9. Name and Address of Current Registered Agent: CONDO OWNERS ORGANIZATION CENTURY VILLAGE, 3501 WEST DRIVE, DEERFIELD BEACH FL 33442-2085  
10. Name and Address of New Registered Agent (81-84) fields for Name, Street Address, City, and Zip Code (FL 85).

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: D	NAME: FLOMEN, PHILIP	11 TITLE:	D SUE HERTZ
STREET ADDRESS: LYNDHURST D-81	CITY-ST-ZIP: DEERFIELD BEACH FL	12 NAME:	LYNDHURST "D" #79
TITLE: VD	NAME: MARCHESE, CHARLES	13 STREET ADDRESS:	Deerfield Bch, FL
STREET ADDRESS: LYNDHURST D-77	CITY-ST-ZIP: DEERFIELD BEACH FL	14 CITY-ST-ZIP:	
TITLE: HELBIG, JOAN	NAME: HELBIG, JOAN	21 TITLE:	D Willie Rabinovitch
STREET ADDRESS: LYNDHURST D-85	CITY-ST-ZIP: DEERFIELD BEACH FL	22 NAME:	LYNDHURST "D" #78
TITLE: PD	NAME: HELBIG, JOAN	23 STREET ADDRESS:	Deerfield Bch, FL
STREET ADDRESS: LYNDHURST D-85	CITY-ST-ZIP: DEERFIELD Bch. FL	24 CITY-ST-ZIP:	
TITLE: D	NAME: WEDEEN, RUTH	31 TITLE:	
STREET ADDRESS: LYNDHURST "D" #88	CITY-ST-ZIP: DEERFIELD Bch. FL	32 NAME:	
TITLE: S	NAME: SCHUSTER, KATIE	33 STREET ADDRESS:	
STREET ADDRESS: LYNDHURST D-91	CITY-ST-ZIP: DEERFIELD BEACH FL	34 CITY-ST-ZIP:	
TITLE:	NAME:	41 TITLE:	
STREET ADDRESS:	CITY-ST-ZIP:	42 NAME:	
TITLE:	NAME:	43 STREET ADDRESS:	900001797849
STREET ADDRESS:	CITY-ST-ZIP:	44 CITY-ST-ZIP:	-04/29/96--01024--001
TITLE:	NAME:	51 TITLE:	***15128.75
STREET ADDRESS:	CITY-ST-ZIP:	52 NAME:	
TITLE:	NAME:	53 STREET ADDRESS:	
STREET ADDRESS:	CITY-ST-ZIP:	54 CITY-ST-ZIP:	
TITLE:	NAME:	61 TITLE:	
STREET ADDRESS:	CITY-ST-ZIP:	62 NAME:	
TITLE:	NAME:	63 STREET ADDRESS:	
STREET ADDRESS:	CITY-ST-ZIP:	64 CITY-ST-ZIP:	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *Joan Helbig* (954) 429-9522  
DATE: 01/25/96  
DAYTIME PHONE: \_\_\_\_\_

CR2E037 (12/95)