## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Sagretany of State

Secretary of State

DIVISION OF CORPORATIONS

T I BANKA NABAR DIKAK BILING KHIBA IBLOH BEKA TIBEK BIBEK BERKI BIBIK BIBIK BIBIK BARKI IBA

1996

SIGNATURE:

DOCUMENT # 735985

1. Corporation Name

(4)

PALM VILLAS CONDOMINIUM APARTMENTS, INC.

Principal Place of	of Business	Mailing Address		* 1997) 1999 1110 2110 1816 1919 1	
346 S. E. 5TH AVE. DE		PO BOX 1453 DELRAY BEACH	FL 33447-1453		
		US		3. Date Incorporated or Qualified 06/02/1976	3a. Date of Last Report 04/12/1995
2. Principal Plan	ce of Business	2a. Mailing Addre	985	4. FEI Number	Applied For
21		26		<b>59-1738198</b> Not Applicable	
Suite, Apt. #, etc.		Suite, Apt. #,	etc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required
22		27		A Survivo Committee Committee	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution  \$5.00 May Be Added to Fees	
<b>23</b> Zíp	Country	Zip	Country	This corporation has liability for in	
24	25	29	30	Florida Statutes	Yes No
<del></del>	9. Name and Address of Curre	ent Registered Agent		10. Name and Address of New Re	gistered Agent
885 SOUT SUITE E	IAGEMENT INC TH EAST 6TH AVE BEACH FL 33483	2 A	83	ATI Managema diress IP.O. Box Number is Not Acceptable 6 S.C. 5 Ave elavu Beach	FL 85 Zip Code 334/23
11. Pursuant to or registere familiar with SIGNATURE	o the provisions of Seguons 617.050 ad agent, or both in the State of Flo h, and Scept the obligations of Se	07 and 617, 1508. Florida orda. Such charge was didn 61 17501 Florida	a Statutes, the above named corr authorized by the corporation's b Statutes.	poration submits this statement for the purposard of directors. Thereby accept the appo	oose of changing its registered office introduced as registered agent. I am
		ent and file if applicable.	(NOTE Registered Agent signature req	outred when reinstalling) ADDITIONS/CHANGES TO OFFICE	DATE  DE DO AND DIDECTORS IN 15
12.	PS OFFICERS A	ND DIRECTORS	13. ETE 1.1 TITLE A	b 2-16	- Change DZ Addition
TITLE	TUFANIO, PETER	<b>₽</b> Ibcc	12 NAME 10	Jacobson, Ronald	1,000
NAME OTDEST ADDRESS	1060 HOMEWOOD BLVD. J.	104	1.3 STREET ADDRESS	Jacobsoli, Admind	unit Lated
STREET ADDRESS	DELRAY BEACH FL	•••	1 4 CITY-ST-ZIR	Delray Beach, FL	33445
CITY-ST-ZIP TITLE	VD	DEL	ETE 21 TITLE	Pirector	Change
NAME	PEREZ, GUS		2.2 NAME		201
STREET ADDRESS	1220 HOMEWOOD BLVD. #	B-201	2 3 STREET ADDRESS	1220 Homeward Blaz, D	71111
CITY-ST-ZIP	DELRAY BEACH FL		2 4 CITY - ST - ZIP	Delray But FL	27.75
TITLE	SD	□DEL		Vice Pres. Delongy, Marsy Delongy, Marsy K-10	
NAME	DELONGY, MARSY		3 2 NAME	1020 Homewood Blud K-16	9 <b>4</b>
STREET ADDRESS	1020 HOMEWOOD BLVD. K	-104	3.3 STREET ADDRESS	Delray Bob, FL 339	146
CITY-ST-ZIP	DELRAY BEACH FL			2011	lange Addition
TITLE	TD SUCRE ED	□DEL	LETE 41 TITLE TD		is-igo
NAME	SHORT, ED 1060 HOMEWOOD BLVD. J	-102	4 2 NAME 4.3 STREET ADDRESS	Same	
STREET ADDRESS	DELRAY BEACH FL	106	4.3 STREET ADURESS	-	
CITY-ST-ZIP TITLE	D	DEL		Secretari	☐ Change   Addition
NAME	JAWORSKI, JUDE		5.2 NAME	JUNO HONJE WOODS	01 1 101
STREET ADDRESS	1060 HOMEWOOD BLVD. J	-201	5 3 STREET ADDRESS	TOUR HOME WOOD	DUD ZIUI
CITY-ST-ZIP	DELRAY BEACH FL		5.4 CITY-ST-ZIP	TOLLAL BOACH P	t. 33445
TITLE		DEL		COPIN PERSON I	☐ Change ☐ Addition
NAME			62 NAME		_ <i>1</i> 1
STREET ADDRESS			6.3 STREET ADDRESS		1. C. I. X
CITY ST 710			6 4 CITY - ST - ZIP	Jank del	1000 Cd1, 0)
14. I do hereb				lify for the exemption stated in Section 119, curate and that my signature shall have the	
and that	Lam an officer or director of the co	rooration or the receiver.	or trustee empowered to execute	e this report as required by Chapter 617, Fk	orida Statutes; and that my name
appears if	Block 12 or Block 13 if changed,	O A A	an accrecio.	11/2/101	- K-N-All

AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR