


FILE NOW: FILING FEE IS \$61.25

FILED

Sep 23 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortheron Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **736523** (2)

1. Corporation Name

THE FRENCH QUARTER HOMEOWNERS ASSOCIATION, INC.

12000 BASIN ST. NO. WELLINGTON, FL.

Principal Place of Business

Mailing Address

**12000 BASIN ST. X
WELLINGTON FL 33414
US**

**12000 BASIN ST. X
WELLINGTON FL 33414
US**



2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 WELLINGTON FL.	28 WELLINGTON FL.
24 Zip 33414	29 Country USA
25 PALE BEACH	30 USA

3. Date Incorporated or Qualified

08/04/1976

4. FEI Number

59-1783374

Applied For
Not Applicable

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

6. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**FRITTS, ESQ. R
5702 LAKE WORTH ROAD, STE. 4
LAKE WORTH FL 33483**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

000002650220

83

000002650220

84 City

WELLINGTON

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	BEVERLY BENNIS
NAME	PATTURELL, CLAIRE	1.2 NAME	11916 BASIN ST S
STREET ADDRESS	12069 BASIN ST W	1.3 STREET ADDRESS	WELLINGTON, FL 33414
CITY-ST-ZIP	WELLINGTON FL	1.4 CITY-ST-ZIP	WELLINGTON, FL 33414
TITLE	T	2.1 TITLE	LUCY RUNYON
NAME	COLMAN, PETER	2.2 NAME	12062 BASIN ST S
STREET ADDRESS	12018 BASIN STREET E	2.3 STREET ADDRESS	WELLINGTON, FL 33414
CITY-ST-ZIP	WELLINGTON FL	2.4 CITY-ST-ZIP	WELLINGTON, FL 33414
TITLE	S	3.1 TITLE	GREGORY KEYES
NAME	HOROWITZ, EVELYN	3.2 NAME	12089 BASIN ST W
STREET ADDRESS	12018 BASIN ST E	3.3 STREET ADDRESS	WELLINGTON
CITY-ST-ZIP	WELLINGTON FL	3.4 CITY-ST-ZIP	WELLINGTON
TITLE	D	4.1 TITLE	HELEN WITT
NAME	RUNYON, LUCY	4.2 NAME	12095 BASIN ST W
STREET ADDRESS	12062 BASIN ST S	4.3 STREET ADDRESS	WELLINGTON, FL 33414
CITY-ST-ZIP	WELLINGTON FL	4.4 CITY-ST-ZIP	WELLINGTON, FL 33414
TITLE	D	5.1 TITLE	KEVIN POIGNANT
NAME	NOTNAN, JACK	5.2 NAME	12054 N BASIN ST
STREET ADDRESS	12053 BASIN ST N	5.3 STREET ADDRESS	WELLINGTON, FL 33414
CITY-ST-ZIP	WELLINGTON FL	5.4 CITY-ST-ZIP	WELLINGTON, FL 33414
TITLE	G	6.1 TITLE	CHARLES ROBIN
NAME	GREGORY KEYES	6.2 NAME	12035 BASIN ST N
STREET ADDRESS	12089 BASIN ST W	6.3 STREET ADDRESS	WELLINGTON, FL 33414
CITY-ST-ZIP	WELLINGTON	6.4 CITY-ST-ZIP	WELLINGTON, FL 33414

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

Beverly Bennis 6/8/98

CR2E037 (10/97)