FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT #

(3)

OAKDALE ONE ASSOCIATION, INC.

FILED Apr 23 1998 8:00am Secretary of State

Discipal Disco of Dunings Mailing Address					 1			
Principal Place of Business Mailing Address								
\$995 BANNOCK TERR \$995 BANNOCK TERR C/O CRYSTAL MANAGEMENT C/O CRYSTAL MANAGE BOYNTON BEACH FL 33437 BOYNTON BEACH FL 33					3. Date Incorporated or Qualified 08/16/1977			
BUTNIUN BEA	OH FC 33437	BOYNTON BEACH FL 3343	,		4. FEI Number	Applied For		
					59-1846262	Not Applicable		
2. Principal P	lace of Business	2a. Mailing Address			5. Certificate of Status Desired	\$8.75 Additional		
26				Certificate of Status Desired	Fee Required			
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			6. Election Campaign Financing	\$5.00 May Be		
22					Trust Fund Contribution			
City & Stat	e	City & State			7. Is this nonprofit corporation a homeo			
23 Zip	Country	28	Country					
24]	— — — — — — — — — — — — — — — — — — —	_ `	30	1	 This corporation owes or has paid the Personal Property Tax due June 30. 	Pres □ No		
24	9. Name and Address of Curre		301		10. Name and Address of New Registe			
	J. 112		81	Name				
BARTLETT, JOE								
CRYSTAL COMMUNITY MANAGEMENT			82	82 Street Address (P.O. Box Number is Not Acceptable)				
5995 BANNOCK TERR			83		· · · · · · · · · · · · · · · · · · ·			
			84	ļ				
DOTAL	BOYNTON BEACH 33437			City		FI 85 Zip Code		
11. Pursuant	to the provisions of Sections 617.05	02 and 617.1508, Florida Statute	s, the above	e-named (corporation submits this statement for the purpo	ose of changing its registered		
office or r	registered agent, or both, in the Stat im familiar with, and accept the obli	e of Florida. Such change was a	uthorized b	v the corp	oration's board of directors. I hereby accept the	appointment as registered		
-	in tanilla with, and accept the obig	gations or, Section 617:0003, Fic	AIDA SIAIDIO	3,				
SIGNATURE	Signature, typied or printed name of registered a	gent and title if applicable (NOTE	: Registered Ap	ent signature (equired when reinstating) Di	ATE		
12.	OFFICERS AI	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS			
TITLE	PD	☐ DÉLETÉ	1.1 TITLE	1	VD	Change **Addition		
NAME	MILLER, AL		1.2 NAME	ŀ	KURNIT, HAL			
STREET ADDRESS	11147 OAKDALE RD		1.3 STREET		11091 OAKDALE ROAD			
CITY-ST-ZIP	BOYNTON BCH FL		1.4 C/TY - S	ST-ZIP	BOYNTON BEACH, FL			
TITLE	/ VD	XX DELETE	21 TITLE	ļ		Change Addition		
NAME	COHEN, SAMUEL		2.2 NAME		KUNKEL, RICHARD			
STREET ADDRESS	11127 OAKDALE RD		2.3 STREET	ADDRESS	11155 OAKDALE ROAD			
CITY-ST-ZIP	BOYNTON BCH FL		2.4 CITY-	ST-ZIP	BOYNTON BEACH, FL			
TITLE	SD	☐ DELETE	3.1 TITLE	Į)	Change XX Addition		
NAME	ROMBERG, SYLVIA		3.2 NAME		AALYN, IRVING			
STREET ADDRESS	11063 OAKDALE RD		3.3 STREET		11071 OAKDALE ROAD			
CITY-ST-ZIP	BOYNTON BCH FL		3.4. CITY-	ST-ZIP	BOYNTON BEACH, FL			
TITLE	D	☐ DELETE	4.1 TITLE	Ţ)	Change XX Addition		
NAME	GREENGROSS, SUMNER		4.2 NAME		MELROSE, STAN			
STREET ADORESS	11087 OAKDALE RD		4.3 STREE		11047 OAKDALE ROAD			
CITY-ST-ZIP	BOYNTON BCH FL		4.4 CITY - 5	ST-ZIP	BOYNTON BEACH, FL			
TITLE	D	☐ DELETE	5.1 TITLE		D	☐ Change ★ Maddition		
NAME	KARPEL, MARTIN		5.2 NAME		COHEN, ALBERT			
STREET ADDRESS	11163 OAKDALE RD		5.3 STREE	ADDRESS	11179 OAKDALE ROAD			
1 0.54 07 30	POVNTON BOH FI		CAPITY I	T 700	DOVNMON DEXCU ET			

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.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 City-St-ZiP

TITLE

NAME

STREET ADDRESS

CITY-ST-ZIP

SIGNATURE: Dr. awent

RAPHEL, BERNARD

1159 OAKDALE RD

BOYNTON BEACH FL

■ DELETE

4-13-98 Miller, Pres.

(561) 734-8005

☐ Change

Addition