

**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 # 740294 (4)**

**1. Corporation Name**  
**THE JEFFERSON CONDOMINIUM CORAL SPRINGS ASSOCIATION, INC.**



**Principal Place of Business**  
8821 N.W. 38TH DRIVE  
CORAL SPRINGS FL 33065

**Mailing Address**  
8821 N.W. 38TH DRIVE  
CORAL SPRINGS FL 33065

**3. Date Incorporated or Qualified**  
09/30/1977

**3a. Date of Last Report**  
04/26/1995

**4. FEI Number**  
59-1803683

**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** **2a. Mailing Address**

**21** Suite, Apt. #, etc. **26** Suite, Apt. #, etc.

**22** City & State **27** City & State

**23** Zip **28** Zip **24** Country **25** Country **29** Zip **30** Country

**9. Name and Address of Current Registered Agent**  
NANCY N NOLAN  
8801 NW 38TH DR APT 304  
301  
CORAL GABLES FL 33065

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

**81** Name

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

**83**

**84** City **85** 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		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	TD EDWARDS, BILL	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	8801 NW 38TH DR B305	1.2 NAME	
STREET ADDRESS	CORAL SPRINGS FL	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	D SCHENCK, LOIS	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	8821 NW 38 DR S205	2.2 NAME	
STREET ADDRESS	CORAL SPRINGS FL	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	PD NOLAN, NANCY N	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	8801 NW 38TH SR 304	3.2 NAME	
STREET ADDRESS	CORAL SPRINGS FL	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	D KASTELIC, MARGARET	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	8821 NW 38TH DR 105	4.2 NAME	
STREET ADDRESS	CORAL SPRINGS FL	4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	SD ENNIS, RUTH	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	8821 NW 38TH DR, #102	5.2 NAME	
STREET ADDRESS	CORAL SPRINGS FL	5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	VD FLEBOTTE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	8821 NW 88TH DR 103	6.2 NAME	
STREET ADDRESS	CORAL SPRINGS FL	6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 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:** *William R. Edwards* **4/22/96** **954-753-8650**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (12/95)