FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT #
1. Corporation Name 740966

(7)

PARK VILLAS HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business Mailing Address							81811 01811 1901	
*****		5790 WEST 17 CT. HIALEAH FL 33012						
					 Date Incorporated or Qualified 12/06/1977 	3a. Date of Last 02/20/1		
2. Principal Place of Business		2a. Mailing Address			4. FEI Number		Applied For	
21	26	J			59-1893915	and the second s	Not Applicable	
Suite, Apt. #, etc.	27	Suite, Apt. #, etc.			5. Certificate of Status Desired		Additional Required	
City & State		City & State		6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees				
Zip	Country	Zιρ	Cou	ntry	8. This corporation has liability for in		199.032,	
24 25	29		30			Yes No		
9. Name and Address of Current Registered Agent					10. Name and Address of New Ro	egistered Agent		
				81 Name	Iuen W Genzelez			
Gonzalez, Ricardo				82 Street Add	Juan F. Gonzalez Address P.O. Box Number is Not Acceptable) 1666 West 57th Terrace			
* 5790 WEST 17 CT.					TOOD Mest Dirt Lattace			
HIALEAH FL 33012				83	Hialeah		İ	
*		A		84 City	alari da	FL 85 Z	3012	
11. Pursuant to the provisions or registered about, or both	of Sections 617,0502 and 6 , in the State of Forida. Su	17.1508, Florida Statutes ch change was authorize 7.0500 Elorida Statutes	s, the abo d by the c	ve-named corpo orporation's box	pration submits this statement for the purp and of directors. I hereby accept the appo	pose of changing its re intment as registered	egistered office agent. I am	
SIGNATURE	led name of registered agent and trib	~(A / \// A		F. Gonz Agent signature requir		ry 24,199	6	
12.	OFFICERS AND DIRE		13.	Adia cadimina refin	ADDITIONS/CHANGES TO OFF	2		
TITLE PD		DELETE	1.1 TI	LE		Change	Addition	
NAME RADAMES,	DIAS	/ -	7.2 N/	ME)	Radames, Diaz	_	_	
	TH TERRACE		1.3 \$1	REET ADDRESS				
DITY-ST-ZIP HIALEAH F			1.4 01	1Y-S1-ZIP				
TITLE SD	· · · ·	DELÉTE	2 1 Ti			☐ Change	Addition	
NAME PEROVANI,	OLGA L		22 N/	JME .				
	TH TERRACE		2351	REET ADDRESS				
CITY-ST-ZIP HIALEAH F	L		2 4 0	ITY-ST-ZIP				
TITLE TD		DELETE	3 1 TI	TLF .		☐ Change	☐ Addition	
NAME GONZALEZ	, JUAN F		3 2 N/	ME				
STREET ADDRESS 1666 W 57	TH TERRACE		3 3 S	REET ADDRESS	•			
CITY-S1-ZIP HIALEAH F	<u> </u>		3.4. C	ITY-ST-ZIP				
TITLE		DELETE	4.1 TI	ILE		☐ Change	☐ Addition	
NAME			4. 2 N	AME				
STREET ADDRESS			4.3 S1	REET ADDRESS				
CITY-ST-ZIP				IY-ST-ZIP				
TITLE		[December	5.1 Ti	ILE			Addition	
NAME		DELETE			C0000178	Change	-	
1		DELETE	5.2 N		50000176 -02/29/96010	32645		
STREET ADDRESS		DETELE	5.2 N 5.3 S	REE1 ADDRESS	-03/29/96010	32645		
CITY - ST - ZIP			5.2 N/ 5.3 Si 5.4 Ci	REE1 ADDRESS TY-ST-ZIP	50000176 -03/29/96010 ***61.25	32645 42040	Paddition	
CITY-ST-ZIP TITLE		□ DELETE	5.2 N/ 5.3 S1 5.4 C(REE1 ADDRESS TY-ST-ZIP ILE	-03/29/96010	32645	Addition	
CITY-ST-ZIP TITLE NAME			5.2 N/ 5.3 S ¹ 5.4 Cf 6.1 Tl	REE1 ADDRESS TY-ST-ZIP ILE AME	-03/29/96010	32645 42040	Addition	
CITY-ST-ZIP TITLE			5.2 N/ 5.3 S' 5.4 Cl 6.1 Tl 6.2 N/ 6.3 S'	REE1 ADDRESS TY-ST-ZIP ILE	-03/29/96010	32645 42040	Addition 29-96	

on nereby certify that the information supplied with this filing is voluntarily furnished and does not quality 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 impowered 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 of fin attachment with an address.

GNATURE:

January 24, 1996 (305)558–8 157 January 24, 1996 (305)558-8157 SIGNATURE: