FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

(1)

DELRAY OCEAN VILLAS CONDOMINIUM ASSOCIATION, INC

FILED May 22 1998 8:00am Secretary of State

to Incorporated or Qualified	

•										
Principal Place of Business Mailing Address						A LOBATU JOBIT BYBIT ABUTA TOTAS BILLO LALL BIBIL BIBIL BIBIL BIBIL BIBIL BIBIL BIBIL				
C/O M.J. GALLI	JP		C/C	C/O M.J. GALLUP				3. Date incorporated or Qualified		
235 NE 6TH AVE.				235 NE 6TH AVE.				12/07/1977		
DELRAY BCH FI	L 334 83		DEI US	DELRAY BCH FL 33483				4. FEI Number Applied For		
US			00					59-1783353 Not Applicable		
2. Principal Place of Business 21			2a. 26	2a. Mailing Address 26				Certificate of Status Desired \$8.75 Additional Fee Required		
Sulte, Apt. #, etc.			27	Suite, Apt. #, etc.				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
City & State		28	City & State			•	7. Is this nonprofit corporation a homeowners association? Yes No			
Zip		Country		Zip Country				8. This corporation owes or has paid the current year intangible		
24		25	29		30	0		Personal Property Tax due June 30. Yes No		
	9. Name	and Address of (current Regis	tered Agent		B1	Name	10. Name and Address of New Registered Agent		
						6,	Name			
GALLUP, M.J. 235 NE 6TH AVE						82	Street Add	ddress (P.O. Box Number is Not Acceptable)		
DELRAY BEACH FL 33483						83				
						84	City	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 regist	ered agent and tille RS AND DIREC		TE: Registere 13.	d Age	int signature req	quired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
12.	SDP	OFFICER	15 AND DINE	DELETE	1.1 T	ITLE		Change Addition		
NAME		R, DONALD F			1.2 N			·		
STREET ADDRESS	A4A 4450 NO 141				1.3 STAE		ADDRESS			
CITY-ST-ZIP		LLE, FL 00000			1.4 0	iTY-S	IT-ZIP			
TITLE	VDT			☐ DELETE	21 T	ITLE		Change Addition		
NAME	PRICE,	ronald			2.2 N	AME				
STREET ADDRESS	DRESS 840 RIVER ROAD				2.3 STREET		ADDRESS			
CITY-ST-ZIP	BEAVER PA				2.4 CITY-S		ST-ZIP			
TITLE	DELETE			3.1 TITLE		Change Addition				
NAME	GALLUP, M.J.				3.2 NAME					
STREET ADDRESS	DELDAY DOUGE				3.3 STREET /					
CITY-ST-ZIP	DELRAY BCH. FL			3.4. CITY-ST-ZIP		Change Addition				
TITLE				NAME						
NAME CTOPET ADDRESS		CEAN TERR B					ADDRESS			
STREET ADDRESS	DEI BAY	BEACH FL					ST-ZIP			
CITY-\$T-ZIP TITLE	DECIMI	DENOTTE		DELETE	5.1 7		7(2.11	Change Addition		
NAME				-	5.2					
STREET ADDRESS					5.3 9	TAEET	ADDRESS			
CITY-ST-ZIP							ST-ZIP			
TITLE				DELETE	6.1 7			Change Addition		
NAME					6.21	IAME				
STREET ADDRESS					6.3 9	TREET	r address			
CITY-ST-ZIP					6.40	ITY-S	ST-ZIP			
14. I hereby o	certify that th	ne information supr	olied with this I	filing does not qualify	for the ex	emp	tion stated i	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.