FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

(0)

1. Corporation Name												
HILLSBORO BEACH & YACHT VILLAS, INC.												
,,,,,,,			••									
Principal Place of Business				Mailing Address								

1194 HILLSBORO MILE East Side				1194 HILLSBORO MILE EAST SIDE								
HILLSBORO BEACH FL 33062				HILLSBORO BEACH FL 33062-1531				Data Ingernated or Qual	idiad	30 D	ate of Last R	oport
US			U\$	U\$				 Date Incorporated or Qual 04/27/1978 	illea		04/18/199	
2. Principal Place of Business				2a. Mailing Address				I. FEI Number	,		Ap	plied For
21				26				59-1817738				t Applicable
Suite, Apt. #, etc.				Suite, Apt. #, etc.				5. Certificate of Status Desire	ed		\$8.75 / Fee Re	
City & State				City & State				3. Election Campaign Finance	ina		\$5.00	
23				28			`	Trust Fund Contribution	mig		Added t	
Zip		Country		Zip	Coun	try	E	3. This corporation has liabili	ty for in	tangible	tax under s.	199.032,
24	25 9. Name and Address of Current			29 30				Florida Statutes MY Yes No 10. Name and Address of New Registered Agent				
<u> </u>	9, Name a			т		Agent						
On all and the second						NamO1		elo terr	αr	<u>:G</u>		
Graham, John 1194 Hillsboro Mile						32 Street Ad	ddress		Ceptable	10		
EASTSIDE -						3 11 11	16	0.000		+		
HILLSBORO BEACH FL 33062						34 City	17.	Souncy 11-1	4		85 Zp	Code
					l'	1		Horida_		FL		
11. Pursuant of fice or re	to the provisio	ns of Sections 61 ht. or both, in the	7.0502 and 61' State of Florida	7,1508, Florida Sta a. Such change wa	atutes, the abo as authorized	ove-named co by the corpor	orporat oration's	ion submits this statement fo board of directors. I hereby	r the pu accept	rpose o the app	of changing it pointment as	s registered registered
egent. I a	m familia	, and accept the			Florida State	(B)				21-1	-01	
SIGNATURE	Si Ustup, typod	printed name of registe		applicable (f	NOTE: Registered	Agent signature rec	equired wh	nen reinstating)		DATE	,-97	
12.			S AND DIREC		13.		``.	ADDITIONS/CHANGES TO	OFFICE	RS ANI	D DIRECTOR	S IN 12
TITLE	XV			☐ DELETE	1.1 7/11	E					L Change	■ Addition
NAME	GALLO, ROBERT				1.2 NAM	- 1						
STREET ADDRESS						EE1 ADDRESS						
CITY-ST-ZIP		RO BUH, FL DU	000	DELETE	1,4 CITY 2.1 TITL	r - ST- ZIP					Change	Addition
TITLE NAME	SONNY F	CODADA			2.1 IIIL						CT Outings	
STREET ADDRESS		LSBORO MILE				EET ADDRESS						
CITY-ST-ZIP		ROUGH BEACH	FL			Y - ST - ZIP			92			
TITLE	70 D		- 	DELETE	3.1 TITL						Change	☐ Addition
NAME	GRAHAM,	, JOHN			3.2 NAM	AE .						
STREET ADDRESS		LSBORO MILE ((EAST SIDE)		3 3 STR	eet address						
CITY-ST-ZIP	HILLSOBO	DRO BCH. FL		1		Y-ST-ZIP						1 1 1 20
TITLE .	D			DELETE	4.1 1110						☐ Change	☐ Addition
NAME	GASPAR				4 2 NA							
STREET ADDRESS		LSBORO MILE				EET ADDRESS						
CITY-ST-ZIP TITLE	SD SD	ROUGH BEACH	I TL	DELETE	4.4 CIT 5.1 TITU	r-ST-ZIP					Change	Addition
NAME		NDENEAU		Land Occupie	5.2 NAM	1						
STREET ADDRESS		LSBORO MILE			ŀ	EET ADDRESS						
CITY-ST-ZIP		ROUGH BEACH	l FL		l l	Y-ST-ZIP						
TITLE	11111111111		· · · ·	☐ DELETE	6.1 TITU						Change	Addition
NAME					6.2 NAM	NE						
STREET ADDRESS	'	•			6.3 STR	EET ADDRESS						
OITY OF TID	ł				E A CIT	V. ST. 7IP						

14. Ido 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.

FILED

Apr 21 1997 8:00am

Secretary of State