

**CORPORATION
ANNUAL REPORT
1995**

**Florida Department of Banking & Finance
Division of Corporations**

FILED

95 MAY -1 PM 1:33

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # 743456 (6)

1. Corporation Name

BAY TREE PATIO HOMES CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

**6216 S W 23RD COURT
NORTH LAUDERDALE FL 33068**

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NORTH LAUDERDALE FL 33068**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified 3a. Date of Last Report

06/30/1978

03/08/1994

4. FEI Number

59-2050343

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

Suite, Apt. #, etc.

Suite, Apt. #, etc.

City & State

City & State

Zip

Country

Zip

Country

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☐

**\$68.75 Supplemental
Fee Not Required**

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**NORDE MANAGEMENT CORPORATION
6047 KIMBERLY BLVD. SUITE N
N LAUDERDALE FL 33068**

81 Name

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

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **SD**
NAME **PALMER, VIRGINIA**
STREET ADDRESS **8202 S.W. 23RD STREET**
CITY - ST - ZIP **N. LAUDERDALE FL**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

TITLE **PD**
NAME **KATZ, SIMON**
STREET ADDRESS **8211 S.W. 24TH STREET**
CITY - ST - ZIP **N. LAUDERDALE FL**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

TITLE **VD**
NAME **ROUSH, ROSEMARY**
STREET ADDRESS **8204 SW 23RD ST**
CITY - ST - ZIP **N LAUDERDALE FL**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME **DELETE**
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

TITLE **TD**
NAME **SKOLNICK, MICHAEL**
STREET ADDRESS **8205 S.W. 23RD COURT**
CITY - ST - ZIP **N. LAUDERDALE FL**

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

TITLE **D**
NAME **PROVOST, JANET**
STREET ADDRESS **8105 SW 24 STR**
CITY - ST - ZIP **NO LAUDERDALE FL**

5.1 TITLE ☒ Change ☐ Addition
5.2 NAME **D**
5.3 STREET ADDRESS **ATKINS, RICHARD**
5.4 CITY - ST - ZIP **8204 S.W. 23 CT. # 22 D**
N. LAUDERDALE, FL. 33068

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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 liquidator 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 my address.

SIGNATURE

SIMON KATZ
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/25/95 305-973-1311
Date Signature