## **FILE NOW: FILING FEE IS \$61.25**

**NONPROFIT** CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

Principal Place of Business

743658

(7)

Mailing Address

## LIGHTHOUSE POINT GARDENS NORTH CONDOMINIUM ASSOC IATION, INC.

1951 N.E. 39TH STREET LIGHTHOUSE POINT FL 33064		1951 N.E. 39TH STREET LIGHTHOUSE POINT FL 33084-7436				
E-OHIHOUGE FE		ENGINOUSE FORESTE SO				3. Date Incorporated or Qualified 3a. Date of Last Report 07/20/1978 06/14/1996
2. Principal Pla	ace of Business	2a. Mailing Address				4. FEI Number Applied For
21		26				59-1201636 Not Applicable
Suite, Apt. #	, elc.	Suite, Apt. #, etc.			· · · · · · · · · · · · · · · · · · ·	5. Certificate of Status Desired S8.75 Additional
22		27				5. Certificate of Status Desired Fee Required
City & State		City & State				6. Election Campaign Financing \$5.00 May Be
23		28	1 -			Trust Fund Contribution
Zip	Country	Zip	Ь.	untry		8. This corporation has liability for intangible tax under s. 199.032,
24	25 9. Name and Address of Current	Podletered Agent	30	Τ.		Florida Statutes Yes No 10. Name and Address of New Registered Agent
	9. Hallio and Address of Current	Hadistan Mail		81	Name	
DESCRIPTION DATE A ATSCRIPTION DA						
	Poliakoff & Streitfeld, P.A	•	82 Street Add			t Address (P.O. Box Number is Not Acceptable)
	rling Rd. Derdale fl 33312			83	<del></del>	
FI. LAUL	ENDALE FL 33312					
				84	City	FI 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 registered agen		6 B			re required when reinstating) DATE
12.	of Ficers and		13.	ed Age	nt signature	re required when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PTD	DELETE	111	ITI F		P/D Range Addition
NAME	FERSTLE, GEOGE			VAME	-	F/D
STREET ADDRESS	1951 NE 39TH ST		1		ADDRESS	FERSTLE, GEORGE E.
CITY-ST-ZIP	LIGHTHOUSE PT, FL 00000			CITY-S		11931 N. B.330N BO.
TITLE	VPTA	DELETE	211			Lighthouse Point, Fl. Change Addition
NAME	SCAEFFER, GLADYS		221	JAME		VP/D Change Consider
STREET ADDRESS	1951 N E 39TH ST		1		ADDRESS	FRYNS, ELSIE
CITY-SI-ZIP	LIGHTHOUSE PT, FL 00000				ST-ZIP	Tabl W.E. aacuse.
TITLE	SAVD			TITLE		Lighthouse Point F1.
NAME	FRYNS, ELSIE		3.2 N	NAME		S/D
STREET ADDRESS	1951 N E 39TH ST		3.3 9	STREET	ADDRESS	KEHIR, PAUL
CITY - ST - ZIP	LIGHTHOUSE PT, FL 00000		3.4.	CITY-S	ST-ZIP	1951 N.E.39th St. Lighthouse Point, F1.
TITLE	TD	☐ DÉLETE		ITLE		L. I Change L. I Addition
NAME	FRYNS, EDWARD		4.2	NAME		T/D FRYNS, EDWARD
STREET ADDRESS	1951 N E 39TH ST		4.3 5	STREET	ADDRESS	
CITY-ST-ZIP	LIGHTHOUSE PT. FL 00000		4.4 0	CITY-\$	17 - <b>Z</b> IP	Lighthouse Point, Fl.
TITLE	D	DELETE	5.1 T	TITLE		AS/AV/D Addition
NAME	PHILLIPS, EVERETT	, , , , , , , , , , , , , , , , , , ,	5.2 6	NAME		MURTHA, BARBARA
STREET ADDRESS	1951 N E 39TH ST		5.3 \$	STREET	ADDRESS	1951 N.E.39th St.
CITY-ST-ZIP	LIGHTHOUSE POINT FL	_	5.4 (	CITY-S	ST-ZIP	Lighthouse Point, F1.
TOTLE	D	DELETE	6.11	TITLE		D Change Addition
NAME	KEHIR, PAUL		6.21	NAME		MCCOURT, KENNETH
STREET ADDRESS	1951 N E 39TH ST		6.3 5	STREET	ADDRESS	1951 N.E.39th St
CITY-ST-7IP			6.4 (	CITY-S	7 - ZIP	Lighthouse Point. Fl.
CITY-ST-7IP LIGHTHOUSE PT, FL 00000  64 CITY-ST-7IP T.1 gh thouse Point. F1  14. I do 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 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 to see 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:

George E. Ferstle, Pres.

**FILED** 

Mar 26 1997 8:00am

Secretary of State