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NONPROFIT CORPORATION ANNUAL REPORT

1998

ON ORT FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

744251

(0)

FILED											
Mar	17	1998	8:00am								
Secretary of State											

1. Corporati	ion Name	" ' 77EU	, ,	(5)						
PALERMITI OBSERVATORY, INC.										
FALCE	1111111 ODG	LINATUAT, INU-	•					1 14611 (0614 01611 01014 11411 41101 4110		1 A1A11 A1A14 1881
Principal Place of Business Malling Address								######################################	014   012   100	
16222 133RD N. TERRACE DR. 16222 133RD N. TERRACE D				: np				<del></del>		
JUPITER FL 3		<b>711.</b>	JUPITER		. DR.			3. Date Incorporated or Qualified		ļ
								09/13/1978 4. FEI Number	<del></del>	
								59-1978031	— —	Applied For Not Applicable
2. Principal I	Place of Busin	iess	2a. Maili	ng Address			<del></del>			
21 26						5. Certificate of Status Desired		5 Additional Regulred		
Suite, Apt	l. #, <b>e</b> tc.			, Apt. #, etc.				6. Election Campaign Financing		May Be
22	_		27					Trust Fund Contribution		I to Fees
City & Sta	ite		City i	& State				7. Is this nonprofit corporation a homeowr	ners essociat	tion?
23			28					☐ Yes	No No	
Zip	İ	Country	Zip		Count	ry		8. This corporation owes or has paid the d		
24		25	29		30			Personal Property Tax due June 30.		No No
	y. Name	and Address of Curre	mt Hegistered	Agent	8	1 Nam	^	10. Name and Address of New Registers	d Agent	
TOAIAN	N/ 6 ANIFE	0.04				IValli	0			
	CK & GRIFFI				8	2 Stree	t Addre	ss (P.O. Box Number is Not Acceptable)		
	iain street Ota fl 335				8:	2				
SATAS	UIA FL 333	"			Ľ					·
					8-	City		F	85 Zip	p Code
11. Pursuant	to the provisi	ons of Sections 617.05	02 and 617.150	8. Florida Statul	es, the abo	/e-name	d corpo	ration submits this statement for the purpose	of changing	its registered
office or	registered ag	ent, or both, in the State	e of Florida. Sur	ch change was	authorized t	y the co	orporatio	on's board of directors. I hereby accept the a	ppointment e	as registered
SIGNATURE		in, and accept the oblig	ganons or, uson	011 011 0500, 11	Oriua Statut	36.				
SIGNATURE		or printed name of registered ac	pent and title if applica	able. (NO	E: Registered A	gent signati	oeriuper eru	d when reinstating) DATE		,
12.		OFFICERS AN	ND DIRECTORS		13.			ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	ORS IN 12
TITLE	PD	100 4410441 m. m		☐ DELETE	1.1 TITLE				Change	Addition
NAME		ITI, MICHAEL F.			1.2 NAME					
STREET ADDRESS		33RD N DR				T ADDRESS	3			إ
CITY-ST-ZIP	JUPITER	<u>rl</u>		DELETE	1.4 CITY -	ST-ZIP		7=	, .	}
TITLE	VD PALEDIA	ITI, FRANK M.		☐ DELETE	2.1 TITLE		5	VD Establish	Change	Addition C
NAME CTROET ADDRESS		DSSWOOD CT.			2.2 NAME		1 5	ALErmiti, Frank M.		
STREET ADDRESS	1	ANTIC FL				T ADDRESS	2	helbourne, FL 32940	į	
CITY-ST-ZIP TITLE	STD	WIIO FL		DELETE	2. 4 CITY-	·\$1-ZIP				Addition
NAME		ITI, SARA M.		Car Details	3.1 THE		5	TD CARO M.	Aray cuanda	L redución
STREET ADDRESS		SSWOOD CT.				T ADDRESS	17	TD Alemiti, SAra M. 093 Nicklaus Dri Nelbourne, FL 3294		
CITY-ST-ZIP	INDIATLA				3.4. CITY		'  Y	Mel house FI 3294	10	
TITLE	ST	H-11		DELETE	4.1 TITLE	Ø1-71L	<del> </del>		Change	Addition
NAME		ITI, BETTY M.			4, 2 NAME					
STREET ADDRESS		33RD N DR			1	T ADDRESS				
CITY-ST-ZIP	JUPITER				4.4 CITY-					
TITLE				DELETE	5.1 TITLE				Change	Addition
NAME					5.2 NAME				_	
STREET ADDRESS	]					T ADDRESS				
CITY-ST-ZIP	<u></u>				5.4 CITY-	ST-ZIP				1
TITLE		•		DELETE	6.1 TITLE				Change	☐ Addition
NAME					6.2 NAME					
STREET ADDRESS					6.3 STREE	T ADDRESS				
CITY-ST-ZIP	<u> </u>				6.4 CITY-	ST-ZIP				
44   harabure	andifications that	information aumnited u	side dele diline de	an mad an alle the		4144 444	1 - D	antica 440 07(0)(i) Florido Otos ser 14 de		

1. I hereby certify that the information supplied with this filling 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.

SIGNATURE: Muha Prakiniti Michael Palemiti March 8 1998

CR2E037 (10/97)