## **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 #

(8)

VICTORIA VILLAGE "F" CONDOMINIUM ASSOCIATION, IN

Principal Place of Business Mailing Address 1310 AVENUE OF THE STARS 1310 AVENUE OF THE STARS COCONUT CREEK FL 33066-1485 COCONUT CREEK FL 33066 3. Date Incorporated or Qualified 10/13/1978 3a. Date of Last Report 03/22/1996 4. FEI Number 2a. Mailing Address 2. Principal Place of Business Applied For 59-1814340 21 26 Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 22 27 City & State City & State 6. Election Campaign Financing \$5.00 May Be П 23 28 Trust Fund Contribution Added to Fees Zıp Country Zip Country This corporation has liability for Intangible tax under s. 199.032, Yes No 24 30 Florida Statutes 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 RAVO, PAT T. Street Address (P.O. Box Number is Not Acceptable) 82 1310 AVENUE OF THE STARS 83 % WYNMOOR COMMUNITY COUNCIL, INC. COCONUT CREEK FL 33066 84 City 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 agent and title if applicable (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS (96/6) (96/6) 12 13. DELETE Change Addition 1 1 TITLE TITLE SCHWADRON, MORRIS NAME 1.2 NAME 2901 A3 VICTORIA CIRCLE STREET ADDRESS 1.3 STREET ADDRESS COCONUT CREEK, FL 00000 1.4 CITY-ST-ZIP CITY - ST - ZIP DELETE 2.1 TITLE Change Addition TITLE KUGEL, RITA 2.2 NAME NAME 2901 E1 VICTORIA CIRCLE STREET ADDRESS 2 3 STREET ADDRESS COCONUT CREEK, FL 00000 2 4 CITY-ST-ZIP CHTY-ST-ZIP DELETE 31 TITLE ☐ Change Addition TITLE NIEMY, SELMA 3.2 NAME NAME 2901 F4 VICTORIA CIRCLE 3.3 STREET ADDRESS STREET ADDRESS COCONUT CREEK FL 3.4. CITY-ST-ZIP CITY - ST - ZIP DELETE Change Addition TITLE 4.1 TITLE NAME BORNE, ARTHUR A 4. 2 NAME 2901 L3 VICTORIA CIRCLE STREET ADDRESS 4.3 STREET ADDRESS COCONUT CREEK, FL 00000 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 5.1 TITLE DILE BADEN, WILLIAM 5.2 NAME NAME

6.4 CITY-ST-ZIP 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 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

**5.3 STREET ADDRESS** 

**6.3 STREET ADDRESS** 

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

STREET ADDRESS

STREET ADDRESS

CITY - ST - ZIP

CITY-ST-ZIP

TITLE

NAME

2901 L1 VICTORIA CIRCLE

COCONUT CREEK FL

DELETE

Change

Addition

**FILED** 

May 19 1997 8:00am

Secretary of State