FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

FILED

Jun 30 1997 8:00am

Secretary of State

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 745734

(4)

NOVA GARDENS CONDOMINIUM ASSOCIATION, INC.

,,,,							
Principal Place of Business Mailing Address						INI NINI NINI NINI NINI NINI N	NIBIN BYANC HABY
10001 W OAKLAND PK BLVD 3RD FLOOR 1 SUNRISE FL 33351		10001 W OAKLAND PK BLVD 3RD FLOOR SUNRISE FL 33351-6925					
					3. Date incorporated or Qualified 01/26/1979	3a. Date of Last I 02/01/19	Report)96
2. Principal P	Place of Business 75 HIATUS (21)	28. Mailing Address 28. 3475 W.	23//		4. FEI Number 59-1999646		Applied For lot Applicable
Suite, Apt. #, etc. Suite, Apt. #, et 27					5. Certificate of Status Desired	, , -	Additional Required
City & Stat	NRISE, FL	City State 28 SUNRISA	NRISE, FL		Election Campaign Financing Trust Fund Contribution		May Be I to Fees
Zip 33	351 25 Country 1	29 33351 3	Country			Yes ☑ 1√No	s. 199.032,
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent							
I CANTO COAST DUDIDEDTY MANAZEMENT				CUM H. WALDRON, TTT SE(P.D. BOX Number 12 Mgt Asceptable) MGT. 75 HIATUS RD.			
	1 1		84 City	>1/1	NRISE	FL 85 子	Code 3351
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 //All Mills							
	Stign are, typed of printed hame of registered agent		logistered Agent signature	required	·	DAYE	50,0110
12.	PD OFFICERS AND	DELETE	13.	т	ADDITIONS/CHANGES TO OFFIC	Change	RS IN 12 Addition
NAME	DARVISH, BONNIE	C DECEME	1.2 NAME			[_] Change	
STREET ADDRESS	7080 NOVA DRIVE #307B		1.3 STREET ADDRESS				
CITY-ST-ZIP	DAVIE FL		4 4 0 17 14 0 17 710	1			\ '
TITLE	-40	DELETE	21 TITLE	17/	ENDEZ, DAVID 100 NOVA DR # AVIE, FL 33	Change	Addition (
NAME	HANNA, BRIAN		2.2 NAME	m	ENDEZ NAVIA		
STREET ADDRESS	7060 NOVA DRIVE #308C		2.3 STREET ADDRESS	7	100 1104 10	<i>₹⊘ ⊆</i>	ľ
CITY-ST-ZIP	DAVIE-FL-		2. 4 CITY - ST - ZIP	LO.	AVIE PL 33	ジラ	
TITLE	SD	☐ DELETE	3.1 TITLE			☐ Change	☐ Addition
NAME	Gershon, Franklin		3.2 NAME				
STREET ADDRESS	7000 NOVA DR. #106		3.3 STREET ADDRESS				
CITY-ST-ZIP	DAVIE FL		3.4. CITY - ST - ZIP				
TITLE	TD	☐ DELETE	4.1 TITLE			☐ Change	☐ Addition
NAME .	SHERNOFF, FLORENCE		4. 2 NAME	ļ			ļ
STREET ADDRESS	7060 NOVA DRIVE #307C		4.3 STREET ADDRESS				
CITY-ST-ZIP	DAVIE FL		4.4 CITY - ST - ZIP			-	
TITLE		☐ DELETE	5.1 TITLE			☐ Change	Addition
NAME	,		5.2 NAME	1			
STREET ADDRESS		1	5.3 STREET ADDRESS				
CITY-ST-ZIP		AFI FEE	5.4 CITY - ST - ZIP				A 1.00
TITLE		DELETE	6.1 TITLE	}		Change	Addition
NAME			6.2 NAME	1			ļ
STREET ADDRESS			6.3 STREET ADDRESS				
CITY-ST-ZIP	nu certify that the information numbined	unt this films show not a solit t	64 CITY-ST-ZIP	totod !	Cootion 110 07(2)(i) Finding Continue	I further earlifus	1 the

4. 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 appears in Block 12 or Block 13 if chapted an attack first that my name.

appears in Block 12 or Block 13 if changed, er only a alactment with an address.