

FILE NOW: FILING FEE IS \$61.25

**FILED**  
**Jun 10, 1999 8:00 am**  
**Secretary of State**

06-10-1999 90038 001 \*2,695.00

NONPROFIT CORPORATION ANNUAL REPORT  
**1998-1999**

FLORIDA DEPARTMENT OF STATE  
**Sandra B. Mortham**  
 Secretary of State  
 DIVISION OF CORPORATIONS



DOCUMENT # **746646** (9)  
 1. Corporation Name  
**ANTIGUA VILLAGE I "A" CONDOMINIUM ASSOCIATION, INC.**

\* 5 7 4 6 4 4 \*  
 574644 - 90038 - 42



Principal Place of Business Mailing Address  
**1310 AVENUE OF THE STARS** **1310 AVENUE OF THE STARS**  
**COCONUT CREEK FL 33066** **COCONUT CREEK FL 33066**  
**US** **US**

3. Date Incorporated or Qualified  
**04/05/1979**

4. FEI Number **59-1877214** Applied For  Not Applicable

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. Is this nonprofit corporation a homeowners association?  Yes  No

8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30.  Yes  No

2. Principal Place of Business 2a. Mailing Address

21. Suite, Apt. #, etc. 26. Suite, Apt. #, etc.

22. City & State 27. City & State

23. Zip Country 28. Zip Country

24. Zip Country 25. Zip Country 29. Zip Country 30. Zip Country

9. Name and Address of Current Registered Agent  
**RAVO, PAT T.**  
**1310 AVENUE OF THE STARS**  
~~1001 WYNWOOD CIRCLE~~  
**COCONUT CREEK FL 33066**

10. Name and Address of New Registered Agent

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 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	NAME	1.1 TITLE	1.2 NAME
S	SCHULMAN, RUTH		
2505 B1 ANTIGUA TERRACE	2505 B1 ANTIGUA TERRACE		
COCONUT CREEK FL	COCONUT CREEK FL		
PD	JACOBSON, IRVING	P-D	Allen Spector
2505 G4 ANTIGUA TERRACE	2505 G4 ANTIGUA TERRACE	2505 Antigua Terrace, Apt. D-4	2505 Antigua Terrace, Apt. D-4
COCONUT CREEK FL	COCONUT CREEK FL	Coconut Creek, FL 33066	Coconut Creek, FL 33066
D	GAMPEL, STANLEY	D	Harvey Hanne
2505 G-2 ANTIGUA TERRACE	2505 G-2 ANTIGUA TERRACE	2505 Antigua Terrace, Apt. G-1	2505 Antigua Terrace, Apt. G-1
COCONUT CREEK FL	COCONUT CREEK FL	Coconut Creek, FL 33066	Coconut Creek, FL 33066
V	COHEN, LOUIS	VP-D	Florence Lipton
2505 LA ANTIGUA TERRACE	2505 LA ANTIGUA TERRACE	2505 Antigua Terrace, Apt. I-4	2505 Antigua Terrace, Apt. I-4
COCONUT CREEK FL	COCONUT CREEK FL	Coconut Creek, FL 33066	Coconut Creek, FL 33066
T	SCHWARTZMAN, FLORA		
2505 J-3 ANTIGUA TERRACE	2505 J-3 ANTIGUA TERRACE		
COCONUT CREEK FL	COCONUT CREEK FL		
D	GELLER, BERNARD		
2505 C-1 ANTIGUA TERRACE	2505 C-1 ANTIGUA TERRACE		
COCONUT CREEK FL	COCONUT CREEK FL		

14. I 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 changed or on an attachment with an address.

SIGNATURE: *Allen Spector* ALLEN SPECTOR PRESIDENT 5/20/99 (954) 978-9600