

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

**FILED**

**Apr 21 1998 8:00am  
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 746691 (5)**

1. Corporation Name  
**ANTIGUA VILLAGE I "E" CONDOMINIUM ASSOCIATION, INC.**

Principal Place of Business <b>1310 AVENUE OF THE STARS COCONUT CREEK FL 33066 US</b>	Mailing Address <b>1310 AVENUE OF THE STARS COCONUT CREEK FL 33066 US</b>
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3. Date Incorporated or Qualified  
**04/09/1979**

4. FEI Number  
**59-1877207**

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	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent

**RAVO, PAT T.  
1310 AVENUE OF THE STARS  
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	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	PD <b>BRAININ, IRVING</b>	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>2501 D-4 ANTIGUA TERR.</b>	1.2 NAME	
STREET ADDRESS	<b>COCONUT CREEK, FL 00000</b>	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	VD <b>WOOGEN, MARTIN</b>	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>2501 G4 ANTIGUA TERR.</b>	2.2 NAME	
STREET ADDRESS	<b>COCONUT CREEK FL</b>	2.3 STREET ADDRESS	
CITY-ST-ZIP		2.4 CITY-ST-ZIP	
TITLE	T <b>CHAVENSON, SAM</b>	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>2501 ANTIGUA TERRACE, APT M-2</b>	3.2 NAME	
STREET ADDRESS	<b>COCONUT CREEK, FL 00000</b>	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	D <b>NEUHAUS, LILLIAN</b>	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>2501 J3 ANTIGUA TERR</b>	4.2 NAME	
STREET ADDRESS	<b>COCONUT CREEK, FL 00000</b>	4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	D <b>GOLDBERG, MARVIN</b>	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>2501 C3 ANTIGUA TERR</b>	5.2 NAME	
STREET ADDRESS	<b>COCONUT CREEK, FL 00000</b>	5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	S <b>NEWMAN, TERRY</b>	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>2501 ANTIGUA TERRACE, APT A-2</b>	6.2 NAME	
STREET ADDRESS	<b>COCONUT CREEK FL</b>	6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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: *Irving Brainin* **Irving Brainin** 1/6/98 (954) 978-2600

CR2E037 (10/97)