## **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 #

748198

(9)

## REGAL PALMS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business Mailing Address			iress				) (BADIN BARIL BIBOL IBIRI BIRID HALAK I	<b>                                    </b>	Alen Dien	Bible IDDA
3200 SPRINGDALE BLVD. OXFORD-115 PALM SPRINGS FL 33461		3200 SPRINGDALE BLVD. OXFORD-115 PALM SPRINGS FL 33461-6391				A Data language of the control of th	To- Date of I			
						"	3. Date Incorporated or Qualified 07/25/1979	3a. Date of t 02/2	_ast Rep 7/1 <mark>996</mark>	
2. Principal P	Place of Business	2a. Mailing A	Address		<del></del>	4	4. FEI Number 59-2163074	-1		ied For Applicable
Suite, Apt.	#, etc	Suite, Ap	pt. #, etc.				5. Certificate of Status Desired		.75 Add	ditional
City & State	e	City & St.	tate				6. Election Campaign Financing	F	ee Requ 5.00 Ma	
23		28			<del></del>		Trust Fund Contribution		dded to f	
Zıp <b>24</b>	Country 25	Zip 29	30	Country			<ol> <li>This corporation has liability for in Florida Statutes</li> </ol>	intangible tax ur ☑ Yes  ☐ No	ider s. 19	99.032,
	9. Name and Address of Curren					11	0. Name and Address of New Re	<u> </u>		
				81	Name			. ,		
MARINO, NICHOLAS J.				82	Street A	ddress	(P.O. Box Number is Not Acceptab	ole)		
3200 SPRINGDALE BLVD. 0-106			83	<del></del>						
PALM SPRINGS FL 33461				84	City	<del></del>		FL 85	Zip Co	de
11. Pursuant	to the provisions of Sections 617.050	2 and 617.1508, I	Florida Statutes.	the above	₃-named c	corporat	tion submits this statement for the c		nino its r	egistered
office or r	to the provisions of Sections 617.050; registered agent, or both, in the State am familiar with, and accept the obliga	of Florida, Such of	change was auth	norized by	the corpo	oration's	board of directors. I hereby accept	of the appointme	int as rec	gistered
•	and deminds with and accept the confe	Illoris OI, Geotion	DIT.UUUU, FIORU	وفاتناهان الا						
SIGNATURE ,	Signature, typed or printed name of registered age	int and title if applicable.	(NOTE: R	Registered Ager	nt signature n	equired wh	hen reinstating)	DATE		
12.	OFFICERS AND	D DIRECTORS		13.			ADDITIONS/CHANGES TO OFFIC		CTORS	IN 12
TITLE	D		DELETE	1.1 TITLE	1	VP	P/1/1/1 D	Cr	ange	X Addition
NAME	GALLUCCI, FRANCES		, , , , , , , , , , , , , , , , , , ,	1.2 NAME	] /	1305	SO PHILLIP DO SPRINGDALE	BLUD	- M-3	201
STREET ADDRESS	3300 SPRINGDALE BLVD. M-3	05	, , , , , , , , , , , , , , , , , , ,	1.3 STREET	ADDRESS	350	10 3/21	-		
CITY-ST-ZIP	PALM SPRINGS FL			1.4 CITY - ST	r-ZIP	PAL	n SPRINGS, FL			
THTLE	D	L	DELETE	2.1 TITLE				☐ Ch	ange .	Addition
NAME	ALONSO, MANUEL			2.2 NAME	İ					
STREET ADDRESS	3300 SPRINGDALE BLVD		ľ	2.3 STREET	ADORESS					
CITY-ST-ZIP	PALM SPRINGS, FL 00000			2. 4 CfTY-S	iT - ZiP					
TITLE	D	I	DELETE	3.1 TITLE				Ch	angé	Addition
NAME	MAJEWSKI, CASIMIR		, , , , , , , , , , , , , , , , , , ,	3.2 NAME	ĺ					
STREET ADDRESS	3500 SPRINGDALE BLVD.		, , , , , , , , , , , , , , , , , , ,	3.3 STREET	ADDRESS					
CITY-ST-ZIP	PALM SPRINGS, FL 00000			3.4. CITY-S	iT-ZIP					
TITLE	PD		DELETE	4.1 TITLE				Ch	ange	Addition
NAME	NICHOLAS, MARINO		, , , , , , , , , , , , , , , , , , ,	4. 2 NAME		1	•			
STREET ADDRESS	3200 SPRINGDALE BLVD		, , , , , , , , , , , , , , , , , , ,	4.3 STREET	ADDRESS	1				
CITY - ST - ZIP	PALM SPRINGS, FL 00000		, , , , , , , , , , , , , , , , , , ,	4.4 CITY - \$1	1-ZiP					
TITLE	TD	£	DELETE	5.1 TITLE			······································	☐ Ch	ange [	Addition
NAME	RODIS, ELIZABETH		,	5.2 NAME						
STREET ADDRESS	3100 SPRINGDALE BLVD.		, , , , , , , , , , , , , , , , , , ,	5.3 STREET	ADDRESS					
CHTY-ST-ZIP	PALM SPRINGS, FL 00000		,	5.4 CITY-ST	T-ZIP					
TITLE	S		DELETE	6.1 TITLE			<u></u>	☐ Ch	ange	Addition
NAME	GARDNER, ROLLO		, , , , , , , , , , , , , , , , , , ,	6.2 NAME	1				-	
STREET ADDRESS	3200 SPRINGDALE BLVD.		,	6.3 STREET	ADDRESS		v			
CITY - ST - ZIP	PALM SPRINGS, FL 00000		, , , , , , , , , , , , , , , , , , ,	6.4 CITY-ST						

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 appears in Block 12 or Block 13 if changed, or on an attachment with an address.

WARIND NICHOLAS J. MARIND
E OF STANING OFFICER OR DIRECTOR

**FILED** 

Feb 28 1997 8:00am

Secretary of State