## 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 # 749480

(0)

PIEDMONT "C" ASSOCIATION, INC.

Principal Place of Business

Mailing Address

C/O SPECIALTY MANAGEMENT COMPANY 220 CONGRESS PARK DR., STE. 130 DELPAY REACH EL 33445 C/O SPECIALTY MANAGEMENT COMPANY 220 CONGRESS PARK DR., STE. 130 DELRAY BEACH FL 33445-4605 FILED May 01 1997 8:00am Secretary of State



Daytime Phone # 0043160

22) CONGRESS PARK DR., STE. 130 DELRAY BEACH FL 33445		DELRAY BEACH FL 33445-4805		3. Date Incorporated or Qualified 10/23/1979	3a. Date of Last Report 04/16/1996	
Pirit V barr - M	CAT COULD THE	PRIME	4GMT_GRO	UP, INC	Number 59-2058370	Applied For Not Applicable
6300 PA		61 V A300 Pi	RK OF COMMERCE YTON, FL 33487		BLV rtificate of Status Desired	Fee Required
BOCA RA	TON, FL. 33487	BUCH KI	41014, 1		ction Campaign Financing	\$5.00 May Be Added to Fees
Ζιρ	l Country	Zip	Cour	ntry	8. This corporation has liability fo	intangible tax under s. 199.032,
4	25	29	30		Florida Statutes  10. Name and Address of New F	Yes No
	9. Name and Address of Currer	t Registered Agent		81 h	10. Name and Address of New Y	
					TT, MYRON	
BOVEN, RANDI GLICK				82 5 SWA1	) PK OF COMMERCE	BLVD
1115 EAST BROWARD BLVD. FT. LAUDERDALE FL 33301				BOC	RATON, FL 3348	
FI. LAUDENDALE PL 33301				B4 (		• • • • • • • • • • • • • • • • • • •
	$\mathcal{O}$			T .		f the police the registered
11. Pursuant l	o the provisions of Sections 617.050	2 and 617.1508, Florid	la Statutes, the at	ove-named corpora	poration submits this statement for the tion's board of directors, I hereby acc	ept the appointment as registered
office or re agent. I ar	egistered agent, or bory in the State manual win, and accept the oblig	ations of Section 617.	0603, Florida Stat	utes.		4/2/100
SIGNATURE						DAY
SIGNATURE		ent and title if applicable	(NOTE Registered	Agent signature requ	ADDITIONS/CHANGES TO OF	ICERS AND DIRECTORS IN 12
12.	OFFICERS AN	ID DIRECTORS DE		rite V		
TITLE	BERNSTEIN, MAX	74	1.2 N	AME 2	CHECTER, SIDU	<i>e /</i> /
NAME	PIEDMONT C #115		135	TREET ADDRESS /	3, PIEDMONTC	6 00,001
STREET ADDRESS	DELRAY BEACH FL 33484		1,40	11Y-85-28 D	ELRAY BEACH	[V33484
CITY-ST-ZIP TITLE	VD	DE DE			MAULLAMAURY	Change Addition
NAME	BRUNO, CHIESA		2.2 N	AME AME	22 TIEDMONT	$\mathcal{C}_{\mathcal{L}}$
STREET ADORESS	PIEDMONT C #116		2.3 S	TREET ADDRESS	2-3-	1 1 32184
CITY-ST-ZIP	DELRAY BEACH FL 33484		2.40	CITY-SI-ZIP	delray regac	Change Addition
TITLE	SD	□ D	LETE 31T	ITLE .	ICHMAN. THIL	Change Addition
NAME	FLORINE, KAYE			IAME	11 PIED MONT	0.
STREET ADDRESS	PIEDMONT C #102		3.3 \$	TREET ADDRESS		JUL 324.84
CITY-ST-ZIP	DELRAY BEACH FL 33484			CITY-ST-ZIP	JELKHY IJEHU	HILL VS FOIL
TITLE	PD	D	ELETE 4.11	ITLE	*****	****
NAME	GOLDBERGER, BERNARD		4.2	NAME	********	
STREET ADDRESS	PIEDMONT C #117		4.3 9	STREET ADDRES	************	****
CITY-ST-ZIP	DELRAY BEACH FL 33484			CITY-ST-ZIP	*****	******
TITLE	D	A c		TITLE	**********	******
NAME	KAYE, FLORINE		•	NAME I		
STREET ADDRESS	PIEDMONT C #102			STREET ADDRESS		
CITY-S1-ZIP	DELRAY BEACH FL 33484	<i>\</i>		CITY-ST-ZIP		Change Addition
TITLE	D	<b>44</b>		TITLE		<u> </u>
NAME	RUBIN, GUS			NAME		
STREET ADDRESS	PIEDMONT C #136			STREET ADDRESS		
CITY-ST-ZIP	DELRAY BEACH FL 33484			CITY-ST-ZIP	ted in Section 119.07(3)(i). Florida Sta	tutes. I further certify that the
14. I do here	by certify that the information supp	lied with this filing does or supplemental annual	s not quality for the report is true and	accurate and the	ted in Section 119.07(3)(i), Florida Sta nat my signature shall have the same port as required by Chapter 617, Flori	legal effect as if made under oath; the
	officer or director of the corporation in Block 12 or Block 13 if changed			execute this rep	nat my signature shall have the same port as required by Chapter 617, Flori	ad Statutos, and that my harno