FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997
DOCUMENT #

750102

(6)

RONOLA APARTMENTS	CONDOMINIUM	ASSOCIATION	INC.

Principal Place of Business

Mailing Address

22 S.E. 3RD TERRACE DANIA FL 33004 22 S.E. 3RD TERRACE DANIA FL 33004-4122

FILED Feb 14 1997 8:00am Secretary of State



3. Date Incorporated or Qualified 3a. Date of Last Report

			12/07/1979	03/19/1996		
 _ ′	ace of Business SEFDERAL HIGHWAY 26 3095 FE	DE MAI WELL	4. FEI Number 59-2003709	Applied For		
21 309 Suite, Apt. #		PENALTION	782	Not Applicable		
	NIA FLORIDA 27 DANIA	FLORIDA	5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & State			6. Election Campaign Financing	\$5.00 May Be		
23	28			Added to Fees		
Zip 24 3300	4 ES BROWARD 29 33004 31	Country BROWARL	This corporation has flability for inf Florida Statutes	tangible tax under s. 199.032, Yes No		
	9. Name and Address of Current Registered Agent		10. Name and Address of New Regi			
81 Nam						
MORAN	JAMES J					
MORAN, JAMES J. 640 EAST OCEAN AVENUE SUITE 16		82 Street Address (P.O. Box Number is Not Acceptable)				
		83				
OOTE 10						
BOYNTON BEACH FL		84 City	——————————————————————————————————————	FL 85 Zip Code		
11. Pursuant t	to the provisions of Sections 617.0502 and 617.1508, Florida Statutes,	, the above-named co	prporation submits this statement for the pu	roose 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 _	DOV.			DATE		
12.	Signature, typed or printed name of registered agent and title if applicable (NOTE: F OFFICERS AND DIRECTORS	Registered Agent signature red 13.	ADDITIONS/CHANGES TO OFFICE			
TITLE	DBM DELETE	1.1 TITLE	ADDITIONO/OFFICE	Change Addition		
Ş	BENOIT, CARMELLA	1.2 NAME		E stange E stanton		
NAME	22 SE THIRD TERRACE, UNIT 6					
STREET ADDRESS	DANIA FL	1.3 STREET ADDRESS				
CITY-ST-ZIP	DBM DELETE	1.4 CITY-ST-ZIP	ОВМ	☐ Change 🍱 Addition		
TITLE			•	•		
NAME	BRAINARD, KATHRYN	2.2 NAME	TEAN PAGE 12 SE SROTERRAC	C UNIT 12		
STREET ADDRESS	309 S. FEDERAL HWY, UNIT 38	1				
CITY-ST-ZIP	DANIA FL TR DELETE	2.4 CITY-ST-ZIP	DANIA FLORIDA	Change Addition		
TITLE	··· —	3.1 TITLE		C Change C Addition		
NAME	SMITHSON, MARY C	3.2 NAME				
STREET ADDRESS	22 S.E. THIRD TERRACE, UNIT 13	3.3 STREET ADDRESS				
CITY-ST-ZIP	DANIA FL	3.4. CITY-ST-ZIP				
TITLE	VP DELETE	4.1 TITLE		Change Addition		
NAME	BODRIAS, MARCEL	4. 2 NAME				
STREET ADDRESS	309 S. FEDERAL HWY, UNIT 33	4.3 STREET ADDRESS				
CITY - ST - ZIP	DANIA FL	4.4 CITY-ST-ZIP				
TITLE	P DELETE	5.1 TITLE	÷	Change Addition		
NAME	SMITHSON, RONALD	5.2 NAME				
STREET ADDRESS	22 S.E. 3RD TERRACE, UNIT 13	5.3 STREET ADDRESS				
CITY - ST - ZIP	DANIA FL	5.4 CHY-ST-ZIP		<u>.</u>		
TITLE	BM DELETE	6.1 TITLE		Change Addition		
NAME	MORRISSETTE, DONAT	6.2 NAME				
STREET ADDRESS	309 S FEDERAL HWY., UNIT 30	6.3 STREET ADDRESS				
CITY-ST-ZIP	DANIA FL	6.4 CITY-ST-ZIP				
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.						