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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
 Secretary of State
 DIVISION OF CORPORATIONS

DOCUMENT # 750102
 1. Corporation Name
RONOLA APARTMENTS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business: 309 S FEDERAL HWY, DANIA FL 33004 US
 Mailing Address: 309 S FEDERAL HWY, DANIA FL 33004 US

140000 - 30120 - 777



2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified
21	26	12/07/1979
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. FEI Number
22	27	59-2003709
City & State	City & State	Applied For
23	28	Not Applicable
Zip	Country	5. Certificate of Status Desired
24	25	<input type="checkbox"/> \$8.75 Additional Fee Required
	29	6. Election Campaign Financing
	30	<input type="checkbox"/> \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

MORAN, JAMES J.
640 EAST OCEAN AVENUE
SUITE 16
BOYNTON BEACH FL

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

TITLE	VP	<input type="checkbox"/> DELETE
NAME	BENOIT, CARMELLA	
STREET ADDRESS	22 SE THIRD TERRACE, UNIT 6	
CITY-ST-ZIP	DANIA FL 33004	
TITLE	DBM	<input type="checkbox"/> DELETE
NAME	BISSON, PAUL	
STREET ADDRESS	22 SE 3RD TERR #18	
CITY-ST-ZIP	DANIA FL 33004	
TITLE	T	<input type="checkbox"/> DELETE
NAME	BISSON, IRENE	
STREET ADDRESS	22 SE 3RD TERR #18	
CITY-ST-ZIP	DANIA FL 33004	
TITLE	P	<input type="checkbox"/> DELETE
NAME	BODRIAS, MARCEL	
STREET ADDRESS	309 S. FEDERAL HWY, UNIT 33	
CITY-ST-ZIP	DANIA FL 33004	
TITLE	DBM	<input type="checkbox"/> DELETE
NAME	ROBITAILLE, NYCOLE	
STREET ADDRESS	22 SE 3RD TERR #17	
CITY-ST-ZIP	DANIA FL 33004	
TITLE	BM	<input type="checkbox"/> DELETE
NAME	MORRISSETTE, DONAT	
STREET ADDRESS	309 S FEDERAL HWY., UNIT 30	
CITY-ST-ZIP	DANIA FL 33004	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	<i>Carmella Benoit</i>
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	<i>Paul Arme Bisson</i>
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	<i>Irene Bisson</i>
3.4 CITY-ST-ZIP	
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	<i>Marcel Boudrias</i>
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	<i>Nycole Robitaille</i>
5.4 CITY-ST-ZIP	
6.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	<i>Donat Morissette</i>
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, with all other like empowered.

SIGNATURE: _____ DATE: 1/20/99 DAYTIME PHONE # _____

SIGNATURE REQUIRED

CRZE037 (1/198)