## FILE NOW: FILING FEE IS \$61.25

**NONPROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS** 

## **DOCUMENT # 752475**

1. Corporation Name

THE VILLA MARIS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Mailing Address

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

27

4404 SOUTH OCEAN BLVD. HIGHLAND BEACH FL 33487-4259

4404 SOUTH OCEAN BLVD. HIGHLAND BEACH FL 33487-4259

## **FILED** Feb 19, 1999 8:00am **Secretary of State**

02-19-1999 90026 021 \*\*\*\*61.25



3. Date incorporated or Qualifed

05/14/1980

59-2178830

4. FEI Number

_		City & State				¢0.75	
Zip		28			5. Certifcate of Status Desired		Additional equired
⊸ '	Country	Zip	Count	у	6. Election Campaign Financing	\$5.00	May Be
4	25	[29]	30		Trust Fund Contribution	.	to Fees
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Reg	istered Agent	
			8	Name			
MATTHEWS, CAREY E				Street	Address (P.O. Box Number is Not Acceptable		
4404-D SO. OCEAN BLVD.			-	- Circoi	Address (F.O. Box Number is Not Acceptable	)	
HIGHLAND BEACH FL 33487			8:	3			
				014			
			84	1 1		FL 85 Zip C	
<ol> <li>Pursuan office or agent. I</li> </ol>	It to the provisions of Sections 617,050 registered agent, or both, in the State am familiar with, and accept the obliga	2 and 617.1508, Florida Statut of Florida. Such change was a tions of Section 617.0503. Flo	es, the about	e-named the corpo	corporation submits this statement for the pur pration's board of directors. I hereby accept th		registered gistered
SIGNATURE			- Ida Glatate				
12.	Signature, typed or printed name of registered ager			nt signature re		DATE	
TITLE	PD OFFICERS AN	D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	RS AND DIRECTO	RS IN 12
NAME	1	☐ DELETE	1.1 TITLE	1		Change	☐ Addition
	HANCOCK, MARGARET E		1.2 NAME				
STREET ADDRESS	THE CO COUNTY DETD	1.3 \$1		TADDRESS			
CITY-ST-ZIP	HIGHLAND BEACH FL		1.4 CITY-ST-ZIP				
IIILE	TD	☐ DELETE	2.1 TITLE			☐ Change	Addition
NAME	MATTHEWS, CAREY E		2.2 NAME				
STREET ADDRESS	THE POST OF THE PERE		2.3 STREE	ADDRESS			
ATY-ST-ZIP	HIGHLAND BEACH FL		2.4 CITY-5	T-ZIP			
TILE	VPD	☐ DELETE	3.1 TITLE			Change	☐ Addition
AME	ECHEVERRIA, JOSE I		3.2 NAME	]			
TREET ADORESS	4404-A SO OCEAN BLVD		3.3 STREE	ADDRESS			
TY-ST-ZIP	HIGHLAND BEACH FL		3.4. CITY-S	T-ZIP	•		
ITLE	SD	C) DELETE	4.1 TITLE			☐ Change	Addition .
IAME	RAPISARDA, ALISON		4.2 NAME			onlingo	
TREET ADDRESS	4404-C SO OCEAN BLVD		4.3 STREET	ADDRESS			
ITY-ST-ZIP	HIGHLAND BEACH FL		4.4 CITY-S1	- 7IP			
ITLE	D	☐ DELETE	5.1 TITLE			☐ Change	Addition
AME	SALTER, ANNE		5.2 NAME	1		□ Otteride	L Addition
TREET ADDRESS	4404-D SQ. OCEAN BLVD.		5.3 STREET	ADDRESS			
TY-ST-ZIP	HIGHLAND BEACH FL		5.4 CITY-ST	-ZIP			
TLE	D	☐ DELETE	6.1 TITLE			☐ Change	Addition
AME .	HANCOCK, FLOYD		6.2 NAME	İ		change	Addition
REET ADDRESS	4404-D SO. OCEAN BLVD.		6.3 STREET	ADDRESS			
TY-ST-ZIP	HIGHLAND BEACH EL 33407		64 CITY, ST	715			
4. I hereby c	ertify that the information supplied with	this filing does not qualify for t	the exemption	n stated i	n Section 119.07(3)(i). Florida Statutes I furth		

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 Block 12 or Block 13 if changed, or on an attachment with an address, with all other like empowered.

Applied For

Not Applicable