## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

Mar 04 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 753014

(0)

## NEW WORLD TOWNHOUSE CONDOMINIUM ASSOCIATION, INC

Principal Place of Business Mailing Address					
235 10TH STREET   235 10TH STREET   LAKE PARK FL 33403-3132   LAKE PARK FL 33403-313		LAKE PARK FL 33403-3132			
				6 District	10- 5 :
				3. Date Incorporated or Qualified 06/29/1984	3a. Date of Last Report 06/28/1996
· '	lace of Business	2a. Mailing Address		4. FEI Number	Applied For
21 Suito Ant	# ata	26		59-2192246	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional
City & State		City & State		• Flashing Council Fi	Fee Required
23		28		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Country	This corporation has liability for in	
24	25	29	30		Yes No
	9. Name and Address of Currer	nt Registered Agent		10. Name and Address of New Reg	platered Agent
81 Name DALDICVA A 1711 LLT					
LINDQUIST, LORRAINE 82 Street Address (P,O, Bex Number is Not Acc					e)
235 10TH ST 2				09 IDM SHREE	7
LAKE PARR FL 33403					
			84 City	alle Apple	85 Zip Code
44 D	10-4-	VO 1.012 1500 Ft 1 D	<u> </u>	hke phek	FL 33403
office or re	to the provisions of Sections 617,050 egistered agent, or both, in the State	≀2 and §17.1508, Florida Statute ⊢of Flooda. Such change was a	es, the above-named outhorized by the corpo	corporation submits this statement for the publication's board of directors. I hereby accept	urpose of changing its registered the appointment as registered
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 language that and accept the obligations of pertion 617.0503, Florida Statutes.					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE					
12.	OFFICERS AN		13.	ADDITIONS/CHANGES TO OFFICE	ERS AND DIRECTORS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE	7,001110110110110110110110110110110110110	Change Addition
NAME	GREEN, ANITA		1.2 NAME		
STREET ADDRESS	321 SANDTREE DR		1.3 STREET ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH FL		1.4 CITY - ST - ZIP	•	
TITLE	VPD	☐ DELETE	2.1 TITLE		Change Addition
NAME	nguyen, William		2.2 NAME	1	•
STREET ADDRESS	6624 143RD STREET		2.3 STREET ADDRESS	· ·	
CITY-ST-ZIP	PALM BEACH GARDENS FL		2. 4 CITY - ST - ZIP	,	
TITLE	SD	☐ DELETE	3.1 TITLE		Change Addition
NAME	RUTH, DEE ANN		3.2 NAME	• .	
STREET ADDRESS	205 10TH ST		3.3 STREET ADDRESS		:
CITY-ST-ZIP	LAKE PARK FL		3.4. CITY-ST-ZIP		
TITLE	TD	☐ DELETE	4.1 TITLE		Change Addition
NAME	HILL, PATRICIA		4. 2 NAME		
STREET ADDRESS	209 10TH ST		4.3 STREET ADDRESS		
City-St-ZiP	LAKE PARK FL	De exe	4.4 CITY-ST-ZIP	· · · · · · · · · · · · · · · · · · ·	
TITLE	D CHIMAN DANGE	☐ D£LETE	5.1 TITLE	·	☐ Change ☐ Addition
NAME PERFECT ADDRESS	SLIMAK, DAVID 2559 HONEY RAOD		5.2 NAME		
STREET ADDRESS	LAKE PARK FL		5.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	D D	DELETE	5.4 C/TY-ST-ZIP 6.1 TITLE		Change Addition
NAME	EVANS, KEITH	Last peccie	6.2 NAME		Change Addition
STREET ADDRESS	1032 SW COLORADO AVENU	IE .			
CITY - ST - ZIP	PORT ST. LUCIE FL		6.3 STREET ADDRESS		
14. I do hereb	ov certify that the information supplier	d with this filing does not qualify	6.4 CITY-ST-ZIP y for the exemption sta	ited in Section 119,07(3)(i). Florida Statutes	. I further certify that the
14. I do hereby certify that the information supplied with this filling 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 direct or other corporation or the receiver of trustee empowered to execute this report as required by Chanter 617, Florida Statutes; and that my series.					
I am an officer or director of the corporation or the receiver of 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, of on an attachment with an address.					