FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

(9)

SILVER THATCH BUILDING NO. THREE ASSOCIATION, IN

C.								
Principal Place of Business		Mailing Address		E SEREN ARADE ANION THAN INTO A	NIO IDII DIDII DIDIE BED	ili 01011 61011 61011 1091		
ON. INC. 3204 COLONY CLUB ROAD		ON. INC. 3204 COLONY CLUB ROAD						
POMPANO E	POMPANO BEACH FL 3				·			
					3. Date Incorporated or Qualified 08/20/1980		Last Report 14/1995	
2. Principal Pl	ace of Business	2a. Mailing Address			4. FEI Number		Applied For	
21		26			59-2074763		Not Applicable	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired		8.75 Additional	
22		27			o. Certificate of Status Desired		Fee Required	
City & State	e	City & State			Election Campaign Financing Trust Fund Contribution	1 1	5.00 May Be Added to Fees	
Zıp			Count	ry	This corporation has liability for			
24	25	25 29 30			· ·			
	9. Name and Address of Currer	nt Registered Agent	` . I		10. Name and Address of New	Registered Ager	nt	
			٤	1 Name				
EDDY, JAMES				82 Street Address (P.O. Box Number is Not Acceptable)				
2401 E. ATLANTIC BLVD.				- 000	in out the box trained to the recepte	GIC;		
POMPANO BEACH FL 33062-5243				3				
			-	4 City		lac	1 7 o Code	
			"	City		FL 85	Zip Code	
or register	to the provisions of Sections 617.0502 red agent, or both, in the State of Flori th, and accept the obligations of, Secl	da. Such change was authorze	s, the above d by the co	named cor rporation's t	rporation submits this statement for the pu coard of directors. I hereby accept the ap	urpose of changing pointment as regis	g its registered office stered agent. I am	
	tti, and accept the obligations of, osci	don orr.0303, Florida Statutes.						
SIGNATURE	Signature, typed or printed name of registered agent	t and little if applicable (NOT)	E Registered A	jent signature re:	quired when reinstalling)	DATE		
12.	OFFICERS AN	D DIRECTORS	13.		ADDITIONS/CHANGES TO OF		CTORS IN 12	
TITLE	PD □DELETE 11		1 1 TITL			☐ Ch.	ange 🔲 Addition	
NAME	HEISS, UTE		1.2 NAM	E				
STREET ADDRESS	3208 COLONY CLUB DR.		1 3 STREET ADDRESS					
CITY-ST-ZIP	POMPANO BEACH FL	POMPANO BEACH FL 14		- S1 - ZIP			<u> </u>	
TITLE	VD	™ DELETE	2 1 TITL		VD PHYLLIS RASUUSS	FN Den	ange 🖫 Addition	
NAME	-THOMPSON, LAWRENCE		2 2 NAM	E		1		
STREET ADDRESS	3204 COLONY CLUB RD.			ET ADDRESS	D PHYLLIS RASUUSSEN Whange WAddition			
CITY - ST - ZIP				·ST · Z/P	COMPANOISFACH, FLA, 33062			
TITLE	SD	DELETE	3 1 TITLI			- - ()	ange - markion	
NAME	RYDER, RUTH		3 2 NAM	E				
STREET ADDRESS	3204 COLONY CLUB RD.		3 3 STRE	ET ADDRESS				
CITY-ST-ZIP	POMPANO BEACH FL	Franc. 140		-ST-ZIP				
TITLE	TD	□ DELÉTÉ	4 1 TITL			Ch:	ange 🔲 Addition	
NAME	ATHAS, ROBERT		4. 2 NAS				1	
STREET ADDRESS	3204 COLONY CLUB RD.		4.3 STRE	ET ADDRESS				
CITY - ST - ZIP	POMPANO BEACH FL	C Decrete	4.4 CITY					
TITLE		DELETE	5.1 TITLE			Cha	ange	
NAME			5 2 NAM					
STREET ADDRESS				ET ADDRESS				
CITY-ST-ZIP		C Dr. CTC	5 4 CITY				process and a second	
TITLE		DELETE	6.1 TITLE			Cha	ange 🔲 Addition	
NAME			62 NAM					
STREET ADDRESS			6 3 STREET ADDRESS					
CITY-ST-ZIP			6.4 CITY	-ST-ZIP				

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: