## SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 17, 1997 AMOUNT DUE ON OR BEFORE 9/17/97: \$61.26 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 755971

(9)

## TWELFTH COURT TOWNHOUSES CONDOMINIUM ASSOCIATION , INC.

**FILED** Aug 25 1997 8:00am Secretary of State



Principal Place of Business	Mailing Address	Mailing Address		a taant raant mitte retrit tabbt tiat åtbit midit dibit dibit dibit ibili		
7 SE 12TH COURT #4 817 SE 12TH COURT #4 EYNOLDS ) (REYNOLDS ) LAUD FL 33316 FT LAUD FL 33316				DO NOT WRITE  3. Date Incorporated or Qualified	3a. Date of Last Report	
				01/20/1981	07/18/1996	
Principal Place of Business 2a. Mailing Address 26				<b>4.</b> FEI Number <b>59-2367298</b>	Applied For  Not Applicable	
Suite, Apt. #, etc. Suite, Apt. 27		Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
City & State	City & State	<b>⊢</b> ′		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip ( Country	Zip 29	Zip Country 30		8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. Yes No		
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent			
DUCCICLO IOMATIANI			B1 Name			
DUFFIELD, JONATHAN 817 S.E. 12TH COURT FT LAUD FL 33316				Street Address (P.O. Box Number is Not Acceptable)		
		[	33			
		Ī	64 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 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)  DATE						
Signature, types of printed neutron of registered agent and union application. Into it, registered agent agreement required white premisitating.						

OFFICERS AND DIRECTORS DELETE TITLE 1.1 TITLE Change Addition | STRICKLAND, RAY 1.2 NAME 821 SE 12TH CT STREET ADDRESS 1.3 STREET ADDRESS FT LAUDERDALE FL 33316 CITY-ST-ZIP 1.4 CiTY - ST - ZIP DELETE Addition TITLE 2.1 TITLE Change TURNER, JUDITH L **2.2 NAME** 821 S.E. 12TH COURT STREET ADDRESS 2.3 STREET ADDRESS FT. LAUDERDALE FL 33316 2. 4 CITY-ST-ZIP CITY-ST-ZIP DELETE Addition 3.1 TITLE Change REYNOLDS, ELIZABETH NAME 3.2 NAME 817 S.E. 12TH COURT STREET ADDRESS 3.3 STREET ADDRESS FT LAUD, FL 00000 CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE Change Addition TITLE CLARKE, DAVID NAME 4. 2 NAME 817 SE 12TH CT STREET ADDRESS 4.3 STREET ADDRESS FT. LAUDERDALE FL 33316 CITY-ST-ZIP 4.4 CITY-ST-ZIP DELETE Change Addition TITLE 5.1 TITLE **DUFFIELD, JONATHAN** NAME 5.2 NAME 817 S.E. 12TH COURT STREET ADDRESS 5.3 STREET ADDRESS FT. LAUDERDALE FL 33316 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition TITLE 61 TITLE MCCOY, DON NAME 6.2 NAME 821 SE 12TH CT STREET ADDRESS 6.3 STREET ADDRESS FT LAUDERDALE FL 33316 CITY-ST-ZIP 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.

Elizabeth Reynolds