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 # 756435

SPICEWOOD VILLAGE PROPERTY OWNERS' ASSOCIATION,

Principal Place of Business

Mailing Address

3715 GOLF ROAD **BOYNTON BEACH FL 33436**

经验

3715 GOLF ROAD **BOYNTON BEACH FL 33436**

FILED May 04, 1999 8:00 am secretary of State

05-04-1999 90071 040 ****61.25



2. Principal P	lace of Business	2a. Mailing Address			3. Date Incorporated or Qualifed 02/19/1981			
21		26			The state of the s	~: <u> </u>		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			4: FEI Number	<u> </u>	lied For	5
22		27			59-2098934		Applicable	:
City & State		City & State			5. Certifcate of Status Desired	\$8.75 A		Ö
23		28			Control of the control	Fee Req	uired	
Zip Country		Zip	Zip Country		6. Election Campaign Financing 5.00 May Be			
24 25		29 30	30		Trust Fund Contribution Added to Fees			
	9. Name and Address of Current I		<u> </u>		10. Name and Address of New Registered Agent 上間胎			
No.				Name				,
			CO. C. N. Inglia Mark Approximation					
	N, ROD	. **	82	Street Addre	ress (P.O. Box Number is Not Acceptable)			
	TRALIAN AVE., S		83					
STE 101		i	63	1			i	
W.PALM E	ICH: FL 33409		84	City		85 Zip C	ode	
•					<u>, , , , , , , , , , , , , , , , , , , </u>	<u> </u>	5,010 6	
11. Pursuant	to the provisions of Sections 617.0502	and 617.1508, Florida Statutes,	the abov	e-named corpo	oration submits this statement for the purpose of	changing its r	egistered istered	1
office or r	egistered agent, or both, in the State of	Florida. Such change was auth ins of, Section 617,0503, Florida	iorized by a Statute:	r the corporations.	on's board of directors. I hereby accept the appoin		13.11	
agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE DATE								
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE: Re	egistered Age	nt signature required	d when reinstating) DATE			6
12	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AN	ID DIRECTOR	RS IN 12	٥
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	TESTA, EDWARD	<u> </u>	1.2 NAME				, (Ŀ
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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:

QUIRED George Sparling, President 4/26/99 (561) 737-5100