

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER SEPTEMBER 30, 1998.  
AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

FILED

Jul 22 1998 8:00am  
Secretary of State

0006960

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 761829

(1)

1. Corporation Name

BARRISTERS BUILDING CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

C/O JFN MANAGEMENT CORP.  
10266 ALLAMANDA CIRCLE  
PALM BEACH GARDENS FL 33410  
US

C/O JFN MANAGEMENT CORP.  
10266 ALLAMANDA CIRCLE  
PALM BEACH GARDENS FL 33410  
US

3. Date Incorporated or Qualified

02/24/1982

4. FEI Number

59-2266300

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible  
Personal Property Tax due June 30. ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21

Suite, Apt. #, etc.

26

Suite, Apt. #, etc.

22

City & State

27

City & State

23

Zip

Country

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KOGAN, DARRYL B.  
PAXTON, CROW, BRAGG, SMITH & KEYSER, P.A.  
1615 FORUM PLACE, STE 500  
W. PALM BEACH FL 33401

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 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

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME P  
DONEY, WILLIAM  
STREET ADDRESS 1615 FORUM PLACE  
CITY-ST-ZIP W. PALM BCH. FL

TITLE ☒ DELETE

NAME V  
MORGAN, BRAGG  
STREET ADDRESS 1615 FORUM PLACE  
CITY-ST-ZIP W. PALM BCH. FL

TITLE ☐ DELETE

NAME SVPD  
BURLINGTON, PHILIP M  
STREET ADDRESS 1615 FORUM PLACE  
CITY-ST-ZIP WEST PALM BEACH FL

TITLE ☐ DELETE

NAME TD  
MACLOSKEY, LOUIS  
STREET ADDRESS 1615 FORUM PLACE  
CITY-ST-ZIP W PALM BCH, FL 00000

TITLE ☐ DELETE

NAME SD  
SELLERS, ROM  
STREET ADDRESS 1615 FORUM PLACE  
CITY-ST-ZIP W PALM BCH, FL 00000

TITLE ☐ DELETE

NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

7/13/98 (561) 684-5544

CR2E037 (5/98)