FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999

Riviera Beach, FL



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 762619

Suite, Apt. #, etc.

CONDOMINIUM OFFICERS' ASSOCIATION OF SINGER ISLA ND. INC.

Principal Place of Business	Mailing Address 5460 N OCEAN DR PH A SINGER ISLAND FL 33404 US					
5460 N OCEAN DR PH A SINGER ISLAND FL 33404 US						
2. Principal Place of Business 21 Riviera Beach, FL	2a. Mailing Address 26 5200 N. Ocean Drive					

Suite, Apt. #, etc. 18-D

FILED Mar 16, 1999 8:00 am Secretary of State

03-16-1999 90009 030 ****61.25

3. Date Incorporated or Qualifed

03/29/1982

65-0044011

4. FEI Number

City & State	9	City & State 28 Riviera B	each. E	FL .	5. Certi	ifcate of Status	Desired	\$8.75 A Fee Re		
Zip	Country	Zip		intry	6. Flec	tion Campaign	Financing	\$5.00	May Be	
a ^z	25	29 33404		ılm Bea	ch Trus	t Fund Contribi		Added t		
(4)	9. Name and Address of Current		1301 - 0				s of New Regist	ered Agent	-	
Talling this Address of Carrett Carrett				Name Marvin Reiner, President						
JAMISON,	JACK			82 Street	Address (P.O. B	lox Number is	Not Acceptable)			
5460 N OCEAN DR										
PH A	DEAN DIT			83 520	O North (Ocean Dr	ive, 18-D			
	SLAND FL 33404			84 City	Division I) l		85 Zip (Code	
	- · · - · · · · · · · · · · · · · · · ·	\wedge		[1	Riviera E			FL 334		
11. Pursuant	to the provisions of Sections 617.0502	and 617.1508, Florida Si	atutes, the a	bove-named	corporation sub	mits this staten	nent for the purpo	se of changing its	registered	
office or r	to the provisions of Sections 617.0502 egistered agent, or both in the State of m familiar with, and accept the obligation	Florida, Such change w ms of S ection 617.0503	as authorizeo . Florida Stat	t by the corp- utes.	oration's poard o	or directors, i ne	ereby accept the	appointment as re	gistoreu	
	MALINIA	011111	Mary	in Rein	er:		3-	10-99		
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable. (I			required when reinstati		DA	TE		
12.	OFFICERS AND DIRECTORS				ADDI	TIONS/CHANG	SES TO OFFICER	OFFICERS AND DIRECTORS IN 12		
TITLE	SD	≯ DELETI	1.1 π	TLE	Millon	Mann		K Change	Addition	
NAME	JAMISON, JACK		1.2 N	AME	Miller,		r., 300-D		'	
STREET ADDRESS	5460 N OCEAN DR PH A	1.3							ı	
CITY-ST-ZIP	SINGER ISLAND FL 33404	1		TY-ST-ZIP	Riviera	viera Beach, FL				
TITLE	PD	DELET	2.1 Π	TLE				☐ Change	☐ Addition	
NAME	REINER, MARVIN L	•		AME	1					
STREET ADDRESS	5200 N OCEAN DR 18D	2		TREET ADDRESS	,					
CITY-ST-ZIP	SINGER ISLAND FL 33404		2.40	TY-ST-ZIP]	* .*				
TITLE	VD	☐ DELET						☐ Change	Addition	
NAME	MONZIANO, ELIZABETH		3.2 N	AME						
STREET ADDRESS	3400 N OCEAN DR PH A		3.3 5	TREET ADDRESS	Į.					
CITY-ST-ZIP	SINGER ISLAND FL 33404		34.0	ITY-ST-ZIP	1					
TITLE	TD	DELET					Lath:	X Change	Addition	
NAME	PELONG, JOHN	/->	•	AME		o, Eliza				
STREET ADDRESS	4200 N OCEAN DR 301-1		4	TREET ADDRESS			r., PH-A			
CITY-ST-ZIP	SINGER ISLAND FL 33404			TY-ST-ZIP	Riviera	Beach,	FL 33404	٠ .		
TITLE	CHACLI IOCAND I C 00404	DELET			 		-	☐ Change	Addition	
NAME	•		5.2 N	AME						
STREET ADDRESS			5.3 S	TREET ADDRESS	1					
CITY-ST-ZIP			5.4 C	TY-ST-ZIP			•		٠	
TITLE		☐ DELET			 		·	Change	Addition	
NAME			6.2 N	AME			•			
			6.3 S	TREET ADDRESS					•	
STREET ADDRESS				rry-st-zip	1					
CITY-ST-ZIP			0.4 C	II I - O I - EUF	L				<u> </u>	

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 supplementarennual 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 reproporation 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 of Granged or on an attachment with an address, with all other like empowered.

SIGNATURE:

3-10-99

561-842-3994

Applied For

Not Applicable