FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

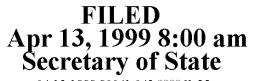
Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 769776

ABBEY PARK GARDENS I CONDOMINIUM ASSOCIATION, IN

Principal Place of Business	Mailing Address				
1750 ABBEY ROAD	1750 ABBEY ROAD				
WEST PALM BEACH FL 33415	WEST PALM BEACH FL 33415				
US	US				



04-13-1999 90041 043 ****61.25

Principal Place of Business Mailing Address									
1750 ABBEY R	IOAD	1750 ABBEY ROAD						<u> </u>	
	EACH FL 33415	WEST PALM BEACH FL 33415	5						
US		U\$			1 188111 18812 81110 1811 18811 181	16 6th 6th 1		,, 616 11 (651	
	•				1				
2. Principal P	lace of Business	2a. Mailing Address			3. Date Incorporated or Qualifed	j			
_ '	ace of Desiriess	26			08/09/1983				
Suite, Apt.	#. etc.	Suite, Apt. #, etc.			4. FEI Number		App	lied For	
22		27			65-0041793		Not	Applicable	
City & Stat	0	City & State			5 Onlife to of Status Designed		\$8.75 A	dditional	
23		28			5. Certifcate of Status Desired		Fee Rec	uired	
Zip	Country	Zip	Country	/	6. Election Campaign Financing		\$5.00	May Be	
24					Trust Fund Contribution	- 1			
	9. Name and Address of Curren	t Registered Agent			10. Name and Address of New	Registered .	Agent		
			81	Name					
MUCITELL	, CYNTHIA		82	Street	Address (P.O. Box Number is Not Accep	table)			
	RD SUITE B		"						
H-103	THE COILE B		83	3					
	RES FL 33467		84	City		- Fi	85 Zip C	ode	
	<u> </u>			<u></u>		FL	لــــ		
11. Pursuant	to the provisions of Sections 617.050	2 and 617.1508, Florida Statutes, of Florida, Such change was author	the abov	re-named the coroo	corporation submits this statement for the ration's board of directors. I hereby access	e purpose of opt the appoi	changing its i itment as reg	registerea jistered	
agent. I a	m familial with and accept the obligat	tions of Section 917.0503, Florida	Statutes	s. //	, , , ,		<i>¶()</i>		
SIGNATURE	Signature, upod by printed name of registered agen	it and utb ir emplicable. (NO to: Res	1/10/	Mt signature in	edured when reinstating)	7~[17		
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO O	FFICERS AN	D DIRECTO	RS IN 12	
TITLE	D	☐ DELETE	1.1 TITLE				Change	☐ Addition	
NAME	GANGONE, LARRY		1.2 NAME					ļ	
STREET ADDRESS	1380 N L ST		1.3 STREE	T ADDRESS			, .		
CITY-ST-ZIP	LAKE WORTH FL		1.4 CITY-5	ST-ZIP					
TITLE	VPD	DELETE	2.1 TITLE	,	VPD		Change	☐ Addition	
NAME	SILAK, SHIRLEY	-	2.2 NAME		PEREZ SUE		-		
STREET ADDRESS	1822 ABBEY RD, H-103		2.3 STREE	T ADDRESS	TOO AUQUBON BL	VP_			
. CITY-ST-ZIP	W PALM BCH FL		2. 4 CITY-		DELRAY BEACH FL		t4 .		
TITLE	S	☐ DELETE	3.1 TITLE				☐ Change	Addition	
NAME	GIAMATTI, GLENN	_	3.2 NAME					1	
STREET ADDRESS	1798 ABBEY RD C-104		3.3 STREE	TADDRESS					
CITY-ST-ZIP	W PALM BCH FL		3.4, CITY-						
TITLE	T	☐ DELETE	4.1 TITLE				Change	Addition	
NAME	SMADT CHEDDVI		4, 2 NAME	:				ļ	
STREET ADDRESS	SMART, CHERRYL 1822 ABBEY RD H-207			T ADDRESS					
			4.4 CITY-5						
CITY-ST-ZIP TITLE	W PALM BCH FL	□ DELETE	5.1 TITLE	-, -		,	☐ Change	Addition	
NAME	D CANCONE TRACY		5.2 NAME						
	GANGONE, TRACY			T ADDRESS				-	
STREET ADDRESS	1000 11 6 01		5.4 CITY-S				•		
CITY+ST+ZIP TITLE	LAKE WORTH FL	☐ DELETE	6.1 TITLE			,	Change	Addition	
	PD NAME OF THE PARTY OF THE PAR		6.2 NAME						
NAME	MUCITELLI, CYNTHIA			T ADDRESS	{			ŀ	
STREET ADDRESS	10227002111011100								
CITY-ST-ZIP	W PALM BCH FL		6.4 CITY-5	51-ZIP	1				

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 expowered 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 emphysized.

SIGNATURE: \