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NONPROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF FTATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997

DOCUMENT #
1. Corporation Name

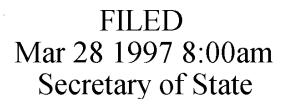
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(3)

A.R.G. CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business
#30, 851 MILES AVE

Mailing Address





#30. 851 MILES WINTER PARK F		#30, 851 MILES AVE WINTER PARK FL 32789									
					3		orated or Quali	fied 3a	Date of Las 04/25	st Report /1996	
2. Principal Pla	ce of Business	2a. Mailing Address			- 4	I. FEI Number				Applied For	
21 851	Miles Hve	. 26 Same				59-25	578287	····		Not Applica	
Suite, Apt. #	A 3	Suite, Apt. #, etc.	····		6	5. Certificate o	of Status Desire	a 🛭	,	5 Additional Required	
City & State	.P. FL-	City & State			6		mpaign Financi Contribution	ng 🔲		00 May Be led to Fees	
Zip Country Zip			Coun	itry	6	6. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No					
24 3278 25 29 30 9. Name and Address of Current Registered Agent				Florida Statutes Yes No 10. Name and Address of New Registered Agent							
	/ .		81 Name								
KENNEKI 851 MILE	CLAPENCE J Kelly T	de Rivers	1	B2 Street	Address	(P.O. Box Nun	nber is Not Acc	eptable)	· · · · · · · · · · · · · · · · · · ·	_ 	-
STE 30	71.13	.C.3 M	1	B3							_
	PARK PS 32789 Winter	ParK71 32789	1	B4 City		<u></u>		F	EL 85 2	ip Code	\neg
11, Pursuant to office or reg agent. I am	the provisions of Sections 617.0502 gistered agent, or both, in the State of familiar withy and accept the obligati	and 617.1508, Florida Statut Florida. Such change was a ons of, Section 617.0503, Flo	es, the about outhorized rida Statu	ove-named by the corp tes.	corporati poration's	ion submits thi board of direc	s statement for ctors. I hereby	the purpos accept the	e of changir appointment	ng its registered as registered	ed d
SIGNATURE	ignature Tyling of printed name of registered agent	- precilent	Doginarad	Agent signature	- va		· · · · · · · · · · · · · · · · · · ·	DAT	3/501	<u>9+</u>	
12.	ignature Typed of printed name of registilled agent OFFICERS AND		13.	Affect Ribusting	e required with		CHANGES TO (TORS IN 12	⊣ം
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STREET ADDRESS	851 MILES AVE STE 18		6.3 STR	EET ADDRESS		2. V	Dark	105	⊹ ≾	. 70	_
City-St-ZiP	WINTER PARK FL y certify that the information supplied	with this filing does not custing		Y-ST-ZIP	on hotels	Section 119 07	(3)(1) Bosido S	tatutae 14.	rther certif		

I do nereoy certify that the morrhation supplied with this litting does not qualify for the exemption stated in Section 119.07(3)(i). Florida Statutes. I further certify the 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.