FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE. Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT # N05804

í	VKE	MINDWOOD	CONDOMINIUM V ASSOCIATION.	INC
ı	MNE	AA ILAH SAAC MESI S	LIUMINIMINIUM V ASSUNAHUM.	IINt

			•••						
Principal Place	e of Business	Mailing Address	Mailing Address					DIEN DIBN	01841 01011 1881
2000 PALMA BOCA RATO US	NOOD TERR DN FL 33431		2800 PALMWOOD TERR BOCA RATON FL 33431 US			3. Date Incorporated or Qualified	3a. Date	of Last F	Report
						10/23/1984	0	2/13/1	995
	ace of Business	2a. Mailing Address	¬			4. FEI Number		-	pplied For
21		26	<u> </u>			59-2512688			lot Applicable
Suite, Apt	#, etc.	Suite, Apt. #, etc.	- 1			5. Certificate of Status Desired \$8.75 Additional Fee Required			
City & Stat	e	City & State	¬ ′			Election Campaign Financing Trust Fund Contribution			May Be I to Fees
Zip	Country	Ζρ	ρ Country			8. This corporation has liability for intangible tax under s. 199.032,			
24	25 29 30				Florida Statutes Yes No				
	Name and Address of Currer	nt Registered Agent				10. Name and Address of New R	agistered Ag	ent	
				81	Name				
PETERS	s, lisa Almwood Terr, p227			82	Street Addin	rees (P.O. Box Number is Not Acceptable)			
	RATON, F L 33431			83					
	•			84	City		FL	85 Zip	Code
or registe	red agent, or both, in the State of Flori ith, and accept the obligations of, Sect	da Such change was authorize ion 617.0503, Florida Statutes.	ed by the c	corpo	oration's boar	ation submits this statement for the purp d of directors. Thereby accept the appo	nose of chang intment as re		
12.	Signature, typics or product cone of registered agent OFFICERS AN		13.	Agent	signature requir a.	ADDITIONS/CHANGES TO OFF	DATE CERS AND D	ufai da Lor	BSTM 12
TITLE	PD			11 IIItE		PLATITIONS OF PURCH GITTO CALL		Change	Addition
NAME	PETERS, LISA		1 2 N					, ,	
STREET ADDRESS	2850 PALMWOOD TERR P22	7			ADDRESS				
CITY-S' ZIP	BOCA RATON FL	•	1.4 C		I - ZIP				
THLE	VD	DELETE				☐ Change		Change	Addition
NAME	ROTHWELL, HERBERT		2 2 NA						1
STREET ADDRESS	2800 PALMWOOD TERR P12	? 4	2351	IHEE I /	ADORESS				1
CHTY - ST - ZIP	BOCA RATON FL		2 4 0	ITY-S	T-ZIP				
TITLE	SD	DELETE	☐DELETE 31 TI					Change	Addition
NAM (ALLAIN, RONALD		3 2 N/						
SIREET ADORESS	2850 PALMWOOD TERR P23	30	338		ADDRESS				
CITY - ST - ZIP	BOCA RATON FL	Doctett			1 - Z(P			Chann	- Add tion
TITLE	TO	_		4 1 TITLE			L	Change	Addition
NAME	WHITE, LAUREL	10	4 2 !						
SIRÉET ADORESS	2800 PALMWOOD TERR P11	19			ADDRESS				
CITY - ST - ZIP				4.4 CITY - ST - ZIP 5.1 TITLE				Change	Add-tion
		Flottert	52 N				L	o range	☐ HOU-BOIL
NAME STREET ADDRESS					ADDRESS				
CITY-S1-ZIP TITLE		DELETE	54 U	ITY-ST ITLE	zir	· · ·		Change	Addition
NAM:			62 N				ت	a-m-igc	
STREET ADDRESS					ADDRESS				
C:TY-ST-ZIP			B	HTV - ST					
	by certify that the information supplied	with this filing is voluntarily furn				or the exemption stated in Section 119.	07(3)(k), Floric	ia Statute	es I furtiner

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: Lisa Polena Parinte NAME OF SIGNING OFFICER OR DIRECTOR

2/1/96 Castrie Phone #