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**NONPROFIT CORPORATION ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT** #

(6)

THE OAK COUPOL OF BELDAY BEACH, INC.

FII	LED
Mar 02 19	998 8:00am
Secretai	ry of State

ine	DAN SCHOOL OF DELHAT	DEACH, INC.							
Principal Pla	ce of Business	Mailing Address						BLÜH ÜI	70) <b>0)0</b> )( 188)
% PHILIP M. SPRINKLE. II         % PHILIP M. SPRINKLE. II           777 S FLAGLER DR STE 900         777 S FLAGLER DR STE 900           W. PALM BEACH FL 33401-3169         W. PALM BEACH FL 33401-3169		900			3. Date Incorporated or Qualified 02/28/1989				
İ						4. FEI Number 65-0144766	H		plied For Applicable
2. Principal Place of Business 28. Mailing Address 26					5. Certificate of Status Desired		.75 /	Additional quired	
Suite, Apt. #, etc. Suite, Apt. #, etc. 27					Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees			
City & Sta	ate	City & State				7. Is this nonprofit corporation a homeowne	rs asso	clation	17
Zip	Country	Zip	Cou	untry	,	8. This corporation owes or has paid the co		ear Inte	analble
24	25	29	30	, · · · ·		Personal Property Tax due June 30.	☐ Yes		] No
	9. Name and Address of Cur	rent Registered Agent		81		10. Name and Address of New Registered	Agent		
0000	4 5 5 10 15 14 H			["]	Name				•
4	KLE, PHILIP M., II FLAGLER DR			82	Street Addre	ess (P.O. Box Number is Not Acceptable)			
SUITE (	900			83					
W. PAL	M BEACH FL 33401			84	City		85	Zip (	ode .
11 Durayant	to the provious of Sections 617.6	0502 and 517 1500 Florida Drate	4 4	Ш		FI		,	
office or	registered agent, or both, in the Sta	ate of Florida. Such change was	authorize	d by	the corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the ap	or chan; pointme	ging its ent as	registered registered
SIGNATURE		rigations of, Section 617.0303, F	TOTICA SIAI	lutes	S.				
	Signature, typed or printed name of registered			d Age	ent eignature require	DATE DATE			
12.	<del></del>	AND DIRECTORS	13.		<del></del>	ADDITIONS/CHANGES TO OFFICERS AN			
TITLE NAME	TD ROMFH, NANCY, A	☐ DELETE		1.1 TITLE			☐ C	nange	Addition
STREET ADDRESS	3261 HOYLAKE RD		1.2 NAME 1.3 Street address		ADDOCCC				
CITY-ST-ZIP	LAKE WORTH FL	LAVE MARRIE E		1.4 CITY-ST-ZIP					
TITLE	SD		■ 14 Ci	1TY - ST					
NAME	MANUAL CATHERINA		1.4 CI 2.1 TI		11-21		Ci	ange	Addition
		DELETE		TLE	15-217		Cr	ange	Addition
STREET ADDRESS	1231 VISTA DEL MAR DR	DÉLETE	2.1 TI 2.2 N/	ITLE AME	ADDRESS		□ Ci	ange	Addition
CITY-ST-ZIP	1231 VISTA DEL MAR DR DELRAY BEACH FL		2.1 TI 2.2 N/ 2.3 SI 2.4 C	ITLE AME TREET A	ADDRESS			•	
CITY-ST-ZIP TITLE	1231 VISTA DEL MAR DR DELRAY BEACH FL D	☐ DELETE	2.1 T/ 2.2 N/ 2.3 S/ 2.4 C 3.1 T/	TLE AME TREET : STY-S TLE	ADDRESS		□ Cr	•	Addition Addition
CITY-ST-ZIP TITLE NAME	1231 VISTA DEL MAR DR DELRAY BEACH FL D MOUW, ARMAND		2.1 Ti 2.2 N/ 2.3 S1 2.4 C 3.1 Ti 3.2 N/	ITLE AME TREET A CITY-S TLE AME	ADDRESS ST-ZIP			•	
CITY-ST-ZIP TITLE NAME STREET ADORESS	1231 VISTA DEL MAR DR DELRAY BEACH FL D MOUW, ARMAND 1231 VISTA DEL MAR DR		2.1 Ti 2.2 N/ 2.3 Si 2.4 C 3.1 Ti 3.2 N/ 3.3 Si	ITLE AME TREET . CITY - S ITLE AME TREET .	ADDRESS ST-ZIP			•	
CITY-ST-ZIP TITLE NAME STREET ADORESS CITY-ST-ZIP	1231 VISTA DEL MAR DR DELRAY BEACH FL D MOUW, ARMAND 1231 VISTA DEL MAR DR DELRAY BEACH FL	☐ DELETE	2.1 Ti 2.2 Nv 2.3 SI 2.4 C 3.1 Ti 3.2 Nv 3.3 SI 3.4, C	THE TREET AME THE THE THE THE TREET AME TREET A	ADDRESS ST-ZIP		□ ¢ł	iange	Addition
CITY-ST-ZIP TITLE NAME STREET ADORESS	1231 VISTA DEL MAR DR DELRAY BEACH FL D MOUW, ARMAND 1231 VISTA DEL MAR DR DELRAY BEACH FL PD		2.1 Ti 2.2 Nv 2.3 Si 2. 4 C 3.1 Ti 3.2 Nv 3.3 Si 3.4, C	TLE AME TREET AME TLE AME TREET AME TREET AME	ADDRESS ST-ZIP			iange	
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	1231 VISTA DEL MAR DR DELRAY BEACH FL D MOUW, ARMAND 1231 VISTA DEL MAR DR DELRAY BEACH FL	☐ DELETE	2.1 Ti 2.2 NV 2.3 SI 2.4 C 3.1 Ti 3.2 NV 3.3 SI 3.4, C 4.1 Ti 4.2 N	THE AME TREET THE AME TREET TREET TREET THE THE TAME	ADDRESS ST-ZIP ADDRESS ST-ZIP		□ ¢ł	iange	Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME	1231 VISTA DEL MAR DR DELRAY BEACH FL D MOUW, ARMAND 1231 VISTA DEL MAR DR DELRAY BEACH FL PD ROMFH, ELISABETH, R	☐ DELETE	2.1 Ti 2.2 NV 2.3 S1 2.4 C 3.1 Ti 3.2 NV 3.3 S1 3.4 C 4.1 Ti 4.2 N 4.3 S1	THE AME TREET THE AME TREET TREET TREET THE THE TAME	ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS		□ ¢ł	iange	Addition
CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	1231 VISTA DEL MAR DR DELRAY BEACH FL D MOUW, ARMAND 1231 VISTA DEL MAR DR DELRAY BEACH FL PD ROMFH, ELISABETH, R 8643 S 45TH ST	☐ DELETE	2.1 Ti 2.2 NV 2.3 S1 2.4 C 3.1 Ti 3.2 NV 3.3 S1 3.4 C 4.1 Ti 4.2 N 4.3 S1	TLE AME TREET A TLE AME TREET A TLE TREET A TLE TREET A TLE TREET A	ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS		□ ¢ł	ange	Addition
CITY-ST-ZIP TITLE MAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	1231 VISTA DEL MAR DR DELRAY BEACH FL  D MOUW, ARMAND 1231 VISTA DEL MAR DR DELRAY BEACH FL  PD ROMFH, EUSABETH, R 8643 S 45TH ST LAKE WORTH FL  D ROMFH, JULES	☐ DELETE	2.1 Ti 2.2 NV 2.3 Si 2.4 C 3.1 Ti 3.2 NV 3.3 Si 3.4 C 4.1 Ti 4.2 N 4.3 Si 4.4 Ci	ITLE TREET AME	ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS		□ cr	ange	Addition Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE	1231 VISTA DEL MAR DR DELRAY BEACH FL  D MOUW, ARMAND 1231 VISTA DEL MAR DR DELRAY BEACH FL  PD ROMFH, EUSABETH, R 8643 S 45TH ST LAKE WORTH FL  D ROMFH, JULES 8643 S 45TH ST	☐ DELETE	2.1 TI 2.2 NV 2.3 SI 2.4 C 3.1 TI 3.2 NV 3.3 SI 3.4 C 4.1 TI 4.2 N 4.3 SI 4.4 CI 5.1 TE 5.2 NV	THE AME TREET, STILE AME TREET, STY-S THE AME TREET, THE TREET, TH	ADDRESS ST-ZIP ADDRESS ST-ZIP ADDRESS		□ cr	ange	Addition Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP	1231 VISTA DEL MAR DR DELRAY BEACH FL  D MOUW, ARMAND 1231 VISTA DEL MAR DR DELRAY BEACH FL  PD ROMFH, EUSABETH, R 8643 S 45TH ST LAKE WORTH FL  D ROMFH, JULES 8643 S 45TH ST LAKE WORTH FL	☐ DELETE	2.1 TI 2.2 NJ 2.3 SI 2.4 C 3.1 TI 3.2 NJ 3.3 SI 3.4 C 4.1 TI 4.2 NJ 4.3 SI 4.4 CI 5.1 TP 5.2 NJ 6.3 ST 6.4 CI	ITLE AME TREET, CITY-S TILE AME TREET, TILE TREET, TILE AME TREET, TILE AME TREET, TILE TREET, TILE TREET, TILE	ADDRESS ST-ZIP  ADDRESS ST-ZIP  ADDRESS T-ZIP  ADDRESS ADDRESS		□ Cr	ange ange	Addition  Addition
CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS STALET ADDRESS	1231 VISTA DEL MAR DR DELRAY BEACH FL  D MOUW, ARMAND 1231 VISTA DEL MAR DR DELRAY BEACH FL  PD ROMFH, EUSABETH, R 8643 S 45TH ST LAKE WORTH FL  D ROMFH, JULES 8643 S 45TH ST	☐ DELETE	2.1 TI 2.2 NJ 2.3 SI 2.4 C 3.1 TI 3.2 NJ 3.3 SI 3.4 C 4.1 TI 4.2 NJ 4.3 SI 4.4 CI 5.1 TP 5.2 NJ 5.3 ST	ITLE AME TREET, STY-S TLE AME TREET, TLE ITME TREET, TY-ST TLE AME TREET, TY-ST TLE	ADDRESS ST-ZIP  ADDRESS ST-ZIP  ADDRESS T-ZIP  ADDRESS ADDRESS		□ cr	ange ange	Addition Addition

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:

**BOYNTON BEACH FL** 

561-212-8415