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FILED
May 19 1997 8:00am
Secretary of State

NONPROFIT CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # N32248 (9)

1. Corporation Name
ABACO VILLAGE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business Mailing Address
1310 AVENUE OF THE STARS
COCONUT CREEK FL 33066
US

3. Date Incorporated or Qualified 05/11/1989
3a. Date of Last Report 03/22/1996

2. Principal Place of Business	2a. Mailing Address	4. FEI Number 65-0120080	Applied For Not Applicable
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.	5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
22 City & State	27 City & State	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
23 Zip	28 Zip	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No	
24 Country	29 Country		

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RAVO, PAT T.
1310 AVENUE OF THE STARS
COCONUT CREEK FL 33068

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	FL 85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	PINSKY, DAVE	
STREET ADDRESS	1601 L1 ABACO DR	
CITY-ST-ZIP	COCONUT CREEK FL	
TITLE	S	<input type="checkbox"/> DELETE
NAME	STEIN, BERYL	
STREET ADDRESS	1602 ABACO DRIVE APT K-1	
CITY-ST-ZIP	COCONUT CREEK FL	
TITLE	P	<input type="checkbox"/> DELETE
NAME	STEIN, GERTRUDE	
STREET ADDRESS	1603 B3 ABACO DR	
CITY-ST-ZIP	COCONUT CREEK FL	
TITLE	V	<input type="checkbox"/> DELETE
NAME	CHARCOK, THELMA	
STREET ADDRESS	1604 H2 ABACO DR	
CITY-ST-ZIP	COCONUT CREEK FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	FANTL, GLORIA	
STREET ADDRESS	1605 ABACO DRIVE APT. A-1	
CITY-ST-ZIP	COCONUT CREEK FL	
TITLE	T	<input type="checkbox"/> DELETE
NAME	ESTRIN, HERB	
STREET ADDRESS	1603 F-2 ABACO DR	
CITY-ST-ZIP	COCONUT CREEK FL	

1.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	Irving Widaen	
1.3 STREET ADDRESS	1601 Abaco Drive, Apt J-3	
1.4 CITY-ST-ZIP	Coconut Creek, FL 33066	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-ST-ZIP		
3.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I do 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: GLORIA FANTL SIGNATURE: [Signature] DATE: 1/31/97 (954) 974-2600

CR2E037 (9/96)