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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

21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.

22 City & State 27 City & State

23 Zip 28 Zip

24 Country 25 Country 29 Country 30 Country

4. FEI Number 65-0120080
Applied For Not Applicable

5. Certificate of Status Desired \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

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 33066

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 Signature: typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D DELETE
NAME PINSKY, DAVE
STREET ADDRESS 1601 L1 ABACO DR
CITY-ST-ZIP COCONUT CREEK FL

1.1 TITLE D Change 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

TITLE S DELETE
NAME STEIN, BERYL
STREET ADDRESS 1602 ABACO DRIVE APT K-1
CITY-ST-ZIP COCONUT CREEK FL

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE P DELETE
NAME STEIN, GERTRUDE
STREET ADDRESS 1603 B3 ABACO DR
CITY-ST-ZIP COCONUT CREEK FL

3.1 TITLE D Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

TITLE V DELETE
NAME CHARCOCK, THELMA
STREET ADDRESS 1604 H2 ABACO DR
CITY-ST-ZIP COCONUT CREEK FL

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE D DELETE
NAME FANTL, GLORIA
STREET ADDRESS 1605 ABACO DRIVE APT. A-1
CITY-ST-ZIP COCONUT CREEK FL

5.1 TITLE PD Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE T DELETE
NAME ESTRIN, HERB
STREET ADDRESS 1603 F-2 ABACO DR
CITY-ST-ZIP COCONUT CREEK FL

6.1 TITLE Change 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] 1/31/97 (954) 974-2600

CR2E037 (9/96)