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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

May 13 1997 8:00am

Secretary of State

881-8166

Daytime Phone # 0040543

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

City-St-7IP

DOCUMENT # N35465

(6)

SEVEN OAKS HOMEOWNERS ASSOCIATION, INC.

Mailing Address Principal Place of Business 641 INLET ROAD 641 INLET ROAD NORTH PALM BEACH FL 33408-3703 NORTH PALM BEACH FL 33408 3. Date Incorporated or Qualified 11/27/1989 3a. Date of Last Report 06/20/1996 2a. Mailing Address 26 2290 SEVEN OAKS LINE 4. FEI Number NOT APPLICABLE 2. Principal Place of Business
7 2290 SEVEN CAKS LINE Applied For Not Applicable Suite, Apt. #, etc. Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired Fee Required 23 City & State Frim BIACH ENZOZNE F City & State \$5.00 May Be 6. Election Campaign Financing FALM BUCH GIRDENS FO 23 Trust Fund Contribution Added to Fees 33 7/0 Country 8. This corporation has liability for intangible tax under s. 199.032, 33410 U51 Yes PNo Florida Statutes 24 20 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name ENDRO, MARTINA Street Address (P.O. Box Number is Not Acceptable)
2290 SEVEN 01K5 C1N9 82 **641 INLET ROAD** 83 NORTH PALM BEACH FL 33408 City Prim BEACH GARDINS Zip Code 3 3 4/3 11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, inglabove-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 617.0553, Florida Statutes. MASTINA ne of registered agent and title if applicat (NOTE: Registered Agent signature required when reinstating) OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. (96/6) DELETE Change Addition 1.1 TITLE TITLE ENDRO, MARTINA NAME 1.2 NAME 2290 SIVEN ONES LINE 641 INLET ROAD 1.3 STREET ADDRESS STREET ADDRESS PALM BUCH GARDENS F. 33413 NORTH PALM BEACH FL 33408 (1) DOTY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 2.1 TITLE TITLE VERSTEEGEN, HANS H 2.2 NAME NAME 7250 SEVEN OIRS MINE 2.3 STREET ADDRESS 4068 LARCH AVENUE STREET ADDRESS PALM BEACH GARDENS FL 33410 2.4 CITY-ST-ZIP CITY-ST-ZIP 31 TITLE DELETE TITLE VERSTEEGEN, ELIZABETH 3.2 NAME NAME 4068 LARCH AVENUE STREET ADDRESS 2250 SEVEN CARS LANE STREET ADDRESS PALM BCH. GARDENS FL 33410 BONIN GARDENT FL 3 OCITY-ST-ZIP CITY-ST-ZIP Change Addition DELETE 4.1 TITLE TITLE NAME 4. 2 NAME STREET ADDRESS 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP CITY-ST-7IP DELETE Change Addition 5.1 TITLE T(T) ₹ 5.2 NAME NAME **5.3 STREET ADDRESS** STREET ADORESS 5.4 CITY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 6.1 FITLE TITLE 6.2 NAME NAME STREET ADDRESS **6.3 STREET ADDRESS**

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing does not quality 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: MAKTINIA FUND TO KUIRED SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR