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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997

DOCUMENT # N40005

1. Corporation Name

(3)

FILED
May 13 1997 8:00am
Secretary of State

Superior	NEWPORT COVE HOMEOWNERS ASSOCIATION, INC.											
2. Principal Place of Business 2. Ameling Address 2. Ameling Address 3. Certificate of Status Desired 5. Certificate of Status Desired 6. Cectificate of Status Desired 5. Certificate of Status Desired 6. Cectificate 6. The Status Desired 6. Cectifi	BOCA RATON FL 33487 BOCA RATON FL 33487-8229							i iddiicos ace digii addis abiii dais.	ethi <b>bib</b> ot bia		<b>e.,, 4,, 21</b> , 14, 4,	
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Zip	City & State	)	City & State	City & State					\$5.00 May Be			
28   28   29   30   Florida Statutes		Country					8. This corporation has liability for intangible tax under s. 19				-	
SWATT, MYRON I. 8300 PARK OF COMMERCE BOULEVARD BOCA RATON FL 33487  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)  84 City  FL 85 Zip Code  11. Pursuant to the provisions of Sactions 57 0502 and 617,1508. Picrida Statutes, the above-named corporation submits this statement for the purpose of changing it registered agent of both, by the State of Piorita-Both change was authorized by the corporation's board of directors, I hereby accept the appointment as registered agent and familiary of the acception obligation of 57, Section 617, 5503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing it registered agent and familiary of the acception obligation of 57, Section 617, 5503, Florida Statutes, the acceptable)  82 Street Address (P.O. Box Number is Not Acceptable)  83 Street Address (P.O. Box Number is Not Acceptable)  84 City  FL 85 Zip Code  11. Pursuant to the provisions of Sactions 57, 0502, Florida Statutes, the acceptable of the appointment of the purpose of changing it registered agent of the corporation submits this statement for the purpose of changing it registered agent of the provisions of the provisi	24						Florida Statutes				_	
SWATT, MYRON I.  8300 PARK OF COMMERCE BOULEVARD BOCA RATON FL 33487  84 City  FL as Zip Code  11. Pursuant to the provisions of Sactions 57: 0502 and 617-1508. Florida Statutios, the above-named corporation submits this statement for the purpose of changing its registered agent of minings of purpose of saction 67: 0502. Period Statutios.  SIGNATURE		9. Name and Address of Curre	ant Registered Agent		81	Name						
B30 PARK OF COMMERCE BOULEVARD BOCA RATON FL 33487  83  64 City  FL 85 Zip Code  11. Pursuant to the provisions of Sections 67/ 05/02 and 617 1508, Fiorida Statutes, the above-named corporation submits this statement for the purpose of changing its registered of control of 17.005, 100 per 17.005, 100	AWAT 18/00/11											
BOCA RATON FL 33467    Sample	SWATT, MYRUN I.				82 Street Addr			(P.O. Box Number is Not Accepta	ıbl <b>e)</b>			1
TI. Pursuant to the provisions of Social is 57' 0502 and 617 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its repistered of ordine or negistered agont. In both, but state of Florida-Both change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent and manifest price accepting obligations of 5, Socion 617,0503, Florida Statutes.  SIGNATURE  SIGNATURE  SIGNATURE  TO  PO  CEERS AND DIRECTORS  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  12. Thur  FENCER, MARTIN  TO DELETE  13. THUE  12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  14. Thur FENCER, MARTIN  TO DELETE  13. THUE  WOLF, MARVIN  22. NAME  SIREET ADDRESS  14. 190 CASTLE ROCK WAY  22. STREET ADDRESS  14. 190 CASTLE ROCK WAY  22. STREET ADDRESS  14. 190 CASTLE ROCK WAY  23. STREET ADDRESS  14. 190 CASTLE ROCK WAY  24. STREET ADDRESS  14. 190 CASTLE ROCK WAY  25. STREET ADDRESS  14. 190 CASTLE ROCK WAY  26. STREET ADDRESS  14. 190 CASTLE ROCK WAY  27. STREET ADDRESS  14. 190 CASTLE ROCK WAY  27. STREET ADDRESS  14. 190 CASTLE ROCK WAY  25. STREET ADDRESS  14. 190 CASTLE ROCK WAY  26. STREET ADDRESS  14. 190 CASTLE ROCK WAY  27. STREET ADDRESS  14. 190 CASTLE ROCK WAY  27. STREET ADDRESS  14. 190 CASTLE ROCK WAY  28. STREET ADDRESS  14. 190 CASTLE ROCK WAY  29. STREET ADDRESS  20.												7
11. Pursuant to the provisions of Seclivins 597 0502 and 617 1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent. I am familiarly plant accept the obligations of 1500, the second office or registered agent. I am familiarly plant accept the obligations of 1500, social statutes.  SIGNATURE  12.					84	City	·		FI	85 Zip (	Code	┪
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12.	SIGNATURE								ומוות	97		
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4. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section (19.07(3)(1), Fiorda 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 correction 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 Chapter 617 in an attachment with an address.

SIGNATURE:

GNATURE AND TYPED OR PRINTED NAME OF BIGNING OFFICER OR DIRECTOR

Dete (37-340)