FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT #

N46794

(6)

(0)		
CHAPTER NO. 487,	INC.	
Mailing Address		
1200 S.E. 15TH AVENUE		3. Date Incorporated or Qualified
DEERFIELD BEACH FL 334	141	01/13/1992
		4. FEI Number Applied For
I do table.		NOT APPLICABLE Not Applicab
⊢		5. Certificate of Status Desired S8.75 Additional Fee Required
<u> </u>	· · · · · · · · · · · · · · · · · · ·	6. Election Campaign Financing \$5.00 May Be
27		Trust Fund Contribution Added to Fees
City & State		7. Is this nonprofit corporation a homeowners association?
28	1 0	☐ Yes ☐ No
— ·	⊢	8. This corporation owes or has pald the current year Intangible Personal Property Tax due June 30. Yes No
11	[30]	10. Name and Address of New Registered Agent
	81 Name	
	82 Street Ac	ddress (P.O. Box Number is Not Acceptable)
	83	
	84 City	FL 85 Zip Code
and 617.1508, Florida Statut	es, the above-named co	
ons of, Section 617.0503, Fl	aumorized by the corpo orida Statutes.	ration's board of directors. I hereby accept the appointment as registered
		quired when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
DELETE	1.1 TITLE	Change Addition
	1.2 NAME	_ , _
	1.3 STREET ADDRESS	
	1.4 CITY-ST-ZIP	·
☐ DELETE	2.1 TITLE	Change Addition
	2.2 NAME	
	2.3 STREET ADDRESS	
Delete		Change Addition
DELETE	4.1 TITLE	☐ Change ☐ Addition
	4. 2 NAME	
	4.3 STREET ADDRESS	
THE BELEVE	4.4 CITY-ST-ZIP	[] A
L' DELEIF		Change Addition
☐ DELETE	5.4 CITY-ST-ZIP 6.1 TITLE	☐ Change ☐ Addition
	Mailing Address 1200 S.E. 15TH AVENUE DEERFIELD BEACH FL 334 28. Mailing Address 26. Suite, Apt. #, etc. 27. City & State 28. Zip 29. Registered Agent and 617.1508, Fiorida Statut f Fiorida, Such change was ons of, Section 617.0503, Fl. and title it applicable. (NOT DIRECTORS DELETE	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip Country 29 Registered Agent 81 Name 82 Street Ad 83 84 City and 617.1508, Fiorida Statutes, the above-named of Florida. Such change was authorized by the corpor ons of, Section 617.0503, Florida Statutes. and title it applicable. (NOTE Registered Agent signature re DIRECTORS 13. DELETE 1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP DELETE 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP DELETE 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 3.4 CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 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 provided by the same legal offect as if made under oath; that I am an officer or director of the corporation or the receiver of trusted empowers 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 a yaddless.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

2-22-98

FILED

Mar 02 1998 8:00am

Secretary of State