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Mar 14 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N50329** (4)

1. Corporation Name

GLEN ABBEY WEST HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business 19146 LYONS ROAD BOCA RATON FL 33434 US	Mailing Address 19146 LYONS ROAD BOCA RATON FL 33434-5536 US
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3. Date Incorporated or Qualified 08/12/1992	3a. Date of Last Report 05/01/1996
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2. Principal Place of Business 21 100 Century Blvd. Suite, Apt. #, etc. 22 City & State 23 West Palm Beach, Florida Zip 24 33417	2a. Mailing Address 26 100 Century Blvd. Suite, Apt. #, etc. 27 City & State 28 West Palm Beach, Florida Zip 29 33417	4. FEI Number 65-0488287
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Applied For ☐	Not Applicable ☐
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
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8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

**RUBIN, MICHAEL
19146 LYONS ROAD
BOCA RATON FL 33434**

10. Name and Address of New Registered Agent

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)

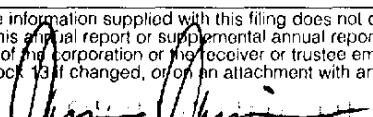
DATE

12. OFFICERS AND DIRECTORS	
TITLE	DP ☐ DELETE
NAME	RUBIN, MICHAEL
STREET ADDRESS	19146 LYONS RD
CITY-ST-ZIP	BOCA RATON FL
TITLE	DVST ☐ DELETE
NAME	JAIVEN, JACK
STREET ADDRESS	19146 LYONS RD
CITY-ST-ZIP	BOCA RATON FL
TITLE	D ☐ DELETE
NAME	LEVY, H. IRWIN
STREET ADDRESS	100 CENTURY BLVD.
CITY-ST-ZIP	W. PALM BCH. FL
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	☐ DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
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



3/17/97

(561) 640-2157

CR2E037 (9/96)