

SECOND NOTICE: CORPORATION FILED FOR DELINQUENT CREDITORS IN 1998
AMOUNT DUE ON OR BEFORE 09/30/98: \$61.25 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$236.25).

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED

98 NOV -2 PM 2:57

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



DOCUMENT # N93000000650 (2)

1. Corporation Name

NOVELTY SUBDIVISION HOMEOWNERS' ASSOCIATION, INC

Principal Place of Business

Mailing Address

% COMMUNITY DEVELOPMENT
100 W. ATLANTIC BLVD.
POMPAÑO BEACH FL 33060

% COMMUNITY DEVELOPMENT
100 W. ATLANTIC BLVD.
POMPAÑO BEACH FL 33060

3. Date Incorporated or Qualified

02/08/1993

4. FEI Number

65-0486193

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

5. Certificate of Status Desired

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

\$5.00 May Be
Added to Fees

7. Is this nonprofit corporation a homeowners association?

☒ Yes ☐ No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HUDSON, L. JAMES
COMMUNITY DEVELOPMENT
100 W. ATLANTIC BLVD.
POMPAÑO BEACH FL 33060

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

0000002679720--9
-11/04/98--01013--006

84 City

*****61. FL ***31.25

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 J.C. WATKINS
STREET ADDRESS 370 NW 14TH ST
CITY-ST-ZIP POMPAÑO BEACH FL

1.1 TITLE T ☐ Change ☒ Addition

1.2 NAME Betty Watkins
1.3 STREET ADDRESS 370 NW 14th Street
1.4 CITY-ST-ZIP Pompano Beach, FL 33060

TITLE VPD ☐ DELETE

NAME ERNESTINE PRICE
STREET ADDRESS 1461 NW 3RD WAY
CITY-ST-ZIP POMPAÑO BEACH FL

2.1 TITLE D ☒ Change ☐ Addition

2.2 NAME Ernestine Price
2.3 STREET ADDRESS 1461 NW 3 Way
2.4 CITY-ST-ZIP Pompano Beach, FL 33311

TITLE DS ☒ DELETE

NAME FLORA LOFTON
STREET ADDRESS 340 NW 14 ST
CITY-ST-ZIP POMPAÑO BEACH FL

3.1 TITLE D ☐ Change ☒ Addition

3.2 NAME Mary Hudeman
3.3 STREET ADDRESS 1440 NW 3 Terrace
3.4 CITY-ST-ZIP Pompano Beach, FL 33060

TITLE D ☒ DELETE

NAME PICKETT, VENDEREE
STREET ADDRESS 1401 NW 3RD WAY
CITY-ST-ZIP POMPAÑO BEACH FL

4.1 TITLE ☐ Change ☒ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE AT ☐ DELETE

NAME JONES, LINDA
STREET ADDRESS 1460 NW 3RD TERR
CITY-ST-ZIP POMPAÑO BEACH FL

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME B. 11/3/98 AR
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE AS ☐ DELETE

NAME JACKSON, JOYCE
STREET ADDRESS 360 NW 14TH STREET
CITY-ST-ZIP POMPAÑO BEACH FL

6.1 TITLE VPD ☒ Change ☐ Addition

6.2 NAME Joyce Jackson
6.3 STREET ADDRESS 360 NW 14th Street
6.4 CITY-ST-ZIP Pompano Beach, FL

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 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: Ernestine Price Ernestine Price

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (5/98)