## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Secretory of State

Secretary of State <sup>4</sup> DIVISION OF CORPORATIONS

1998 DIVISION OF C

DOCUMENT # N9300004809 (0)

1. Corporation	AGO NO. 7 CONDOMINIUI	M ASSOCIATION, INC.					
Principal Place of Business Mailing Address						E 1001/104 GAG (0100 1111) 001(1 001) 001(1 001) 601(1 0100) 101(1 001) 101(1 100)	
801 UNO LAGO DR JUNO BEACH FL \$3408 US		801 UNO LAGO DR JUNO BEACH FL 334 <b>0</b> 8 US				3. Date Incorporated or Qualified 10/25/1993	
US		US				4. FEI Number Applied For	
9 Principal P	ace of Business	2a. Mailing Address	2a Mailing Address			59-2654221   Not Applicable	
21		26			5. Certificate of Status Desired S8.75 Additional Fee Required		
Suite, Apt. #, etc.		Suite, Apt. #, etc.			6. Election Campaign Financing \$5.00 May Be		
City & State		27			Trust Fund Contribution Added to Fees		
City & State	•	City & State				7. Is this nonprofit corporation a homeowners association?	
Zip	Country			ntry		8. This corporation owes or has paid the current year Intangible	
24	25	29	30			Personal Property Tax due June 30. Yes 🔣 No	
	9. Name and Address of Curre	nt Registered Agent		- T		10. Name and Address of New Registered Agent	
				<b>B1</b> N	ame		
SOLOMON, J C # 801 UNO LAGO DR			ţ	<b>82</b> Si	reet Addr	ess (P.O. Box Number is Not Acceptable)	
	DLAGO DR EACH FL 33408		-	83			
JUNU DI	EAUTI PL 33400		Į				
			j	<b>84</b> C	ity	FL 85 Zip Code	
11. Pursuant	to the provisions of Sections 617.05	02 and 617.1508, Florida Stat	utes, the at	ove-na	med corp		
office or re agent. I a	egi <b>ster</b> ed agent, or both, in the Stati m <b>fam</b> iliar with, and accept the oblig	e of Florida. Such change was gations of, Section 617.0503, f	s authorized Florida Stati	d by the utes.	corporati	poration submits this statement for the purpose of changing its registered ion's board of directors. I hereby accept the appointment as registered	
SIGNATURE .							
	Signature, typod or printed name of registered ag			Agent alo	nature require	ed when reinstating) DATE	
12.	OFFICERS AF	ND DIRECTORS	13. 13 TO	TI C		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  Change Addition	
NAME	GRAZIOTTO, RAYMOND E.	B.C.C. 16	1.2 NA				
STREET ADDRESS	801 UNIVERSE BLVD			REET ADD	RESS		
CITY-ST-ZIP	JUNO BCH FL			TY-ST-21	1		
TITLE	DV	DELETE	2.1 TIT			Change Addition	
NAME	HOCHMAN, MAX		2.2 NA	<b>AME</b>	l) (	e solomon u	
STREET ADDRESS	700 UNO LAGO DR #401		2.3 \$T	REET ADD	RESS 8	of une lage or	
CITY-ST-ZIP	JUNO BEACH FL		_	11Y - ST - ZI	بر ا	140 BEACH 76 33408	
TITLE	DST PUDOESS ANAES	DELETE	3.1 TIT		05	Change Addition	
NAME	BURGESS, AIMEE		3.2 NA		1 - 3	illiand a land of a sec	
STREET ADDRESS	801 UNO LAGO DR JUNO BEACH FL		1	REET ADD			
CITY-ST-ZIP TITLE	JUNU DEAUN FL	DELETE	3.4. CI 4.1 T(T	<u> TY-\$1-Z </u>  LE	P Jy	Change Addition	
NAME		L.J Occare	4.2 N/		- 1		
STREET ADDRESS			•	reet addi	BESS		
CITY-ST-ZIP				TY-ST-ZIF			
TITLE		DELETE	5.1 TrT		1	☐ Change ☐ Addition	
NAME			5.2 NA	ME			
STREET ADDRESS			5.3 STI	RÉET ADDI	RESS		
CITY-ST-ZIP			5.4 C(T	TY-ST-ZIF	·		
TITLE		☐ DELETE	6.1 TIT	'LE		☐ Change ☐ Addition	
NAME			6.2 NA		- 1		
STREET ADDRESS			- 1	REET ADD	1		
CITY-ST-ZIP	edity that the internation consting	with this filing dose and much.		IY-SI-ZIF		Section 119.07(3)(i), Florida Statutes. I further certify that the information	
indicated officer or o	on this annual report or supplimental directors of the corporation or the record Richard Richard Or the Richard Ri	tal annual report is true and ac beiver or trustee empowered to achment with an address	ccurate and o execute the	d that m his repo	y signatur ort as requ	re shall have the same legal effect as if made under oath; that I am an ired by Chapter 617, Florida Statutes; and that my name appears in	

4/29/98.

**FILED** 

Jun 11 1998 8:00am

Secretary of State