## FILE NOW: FILING FEE IS \$61.25

NONPROFIT' CORPORATION **ANNUAL REPORT** 

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

**DOCUMENT** # N94000002486 (8)

BEACH COLONY CONDOMINIUM ASSOCIATION, INC.

**FILED** Apr 10 1998 8:00am Secretary of State

Principal Place of Business Mailing Address					1 10411101 010 19111 01111 01111 01111 01111	),,,, an,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
208 JEFFERSON AVE		208 JEFFERSON AVE		3. Date Incorporated or Qualified		
MIAMI BEACH I	FL 33139	#114 Miami Beach Fl 33139			05/16/1994	
		WINDLE DESCRIPTION			4. FEt Number	Applied For
					65-0501727	Not Applicable
2. Principal Place of Business		2a. Mailing Address 26		5. Certificate of Status Desired	\$8.75 Additional Fee Required	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			6. Election Campaign Financing	\$5.00 May 8e
22		27		Trust Fund Contribution	Added to Fees	
City & State	9	City & State			7. Is this nonprofit corporation a homeo	
Zip Country		Zip	Zip Country		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 Curr	ent Registered Agent	8	41 81	10. Name and Address of New Registe	red Agent
	ATT. 511 A		l°	1 Name		
CRONIG, STEVEN C 501 BRICKELL KEY DRIVE			8	2 Street A	Address (P.O. Box Number is Not Acceptable)	
STE 300			8	3		
MAMI F			Ļ	4 0		los I 7:- O-d-
			8	4 City		FL 85 Zip Code
11. Pursuant	to the provisions of Sections 617.05	02 and 617.1508, Florida Statu	tes, the abo	ve-named o	corporation submits this statement for the purpo	se of changing its registered
agent. I a	m familiar with, and accept the obli	gations of, Section 617.0503, Fl	lorida Statut	es.	oration's board of directors. I hereby accept the	appointment as registered
SIGNATURE						
12.	Signature, typed or printed name of registered a  OFFICERS A	pent and little if applicable. (NO ND DIRECTORS	TE: Registered A	gent elgnature r	required when reinstating)  ADDITIONS/CHANGES TO OFFICERS	AND DIRECTORS IN 12
TITLE	PD	DELETE 1.1				Change Addition
NAME			1.2 NAM	.		
STREET ADDRESS	···		1.3 STRE	ET ADDRESS		
CITY-ST-ZIP	MIAMI BEACH FL 33139		1.4 City			
TITLE	· · · · · · · · · · · · · · · · · · ·	VD ☐ DELETE 23				☐ Change ☐ Addition
NAME	AMEEN, NADIA		2.2 NAM			
STREET ADDRESS	208 JEFFERSON AVE., #11 MIAMI BEACH FL 33139	•		ET ADDRESS		
CITY-ST-ZIP TITLE	SD SD	☐ DELETE	2. 4 C/TY 3.1 T/TLE			Change Addition
NAME	BRANDILIEONE, JOSE REN	<del>-</del>	3.2 NAM			
STREET ADDRESS	208 JEFFERSON AVE., #10			ET ADDRESS	•	
CITY-ST-ZIP	MIAMI BEACH FL 33139		3.4. CITY	-ST-ZIP		
TITLE			4.1 TITLE			Change Addition
NAME	GIACIAN, CARLOS		4. 2 NAM	E		
STREET ADDRESS	208 JEFFERSON AVE., #10	7		ET ADDRESS		
CITY-ST-ZIP	MIAMI BEACH FL 33139 D	☐ DELETE	4.4 CITY			Change Addition
TITLE NAME			5.1 TITLE 5.2 NAMI			Landing Land Carl
STREET ADDRESS	208 JEFFERSON AVE., #11	S.		ET ADDRESS		
CITY-ST-ZIP	MIAMI BEACH FL 33139	•	5.4 CiTY	1		
TITLE		DELETE	6.1 TITLE			Change Addition
NAME		—	6.2 NAM	E		- —
CARCET ADDRESS				** ******		

14. Thereby 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 all additional statutes. **SIGNATURE:**