FILE NOW: FILING FEE IS \$61.25...

NONPROFIT CORPORATION ANNUAL REPORT



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

1996

DOCUMENT #
1. Corporation Name

N49981

(6)

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PARK	LINGER	SIRECIS	ASSULIATION.	ING.

Principal Place of Business Mailing Address									BI OLDĀN DĀQIN DA					
4875 N FEDERAL HWY 10TH FLOOR 10TH FLOOR FT LAUDERDALE FL 33308 FT LAUDERDALE FL 33308														
FT LAUDERDALE FL 33308 FT LAUDERDALE FL 33308					12 0000	,			3. Date Incorporated or Qualified 3a. Date of Last Report 07/22/1992 01/26/1995					
	Principal Pl	ace of Busine	ess		. Mailing Addres	s				4. FEI Number	•		pplied For	
21	D :: 4 :			26						65-0354048			ot Applicable	
Suite, Apt. #, etc.			27	Suite, Apt. #, etc.			5. Certificate of Status Desired	1 1 '		Additional lequired				
				City & State					Election Campaign Financing Trust Fund Contribution	1 1 '		May Be to Fees		
<u> </u>	Zip	Country Zip Cou			Country			8. This corporation has liability for intangible tax under s. 199.032,						
24	4 25 29 30 30 9. Name and Address of Current Registered Agent					<u> </u>			Florida Statutes					
┢		9, Name	and Address C	Corrett negis	stered Agent		81	Name	9	10. Name and Address of New Heg	istalen våen			
	MORRIS	SON, RICHA	ARD W.				82			ss (P.O. Box Number is Not Acceptable)				
		FEDERAL I	HWY				83							
10TH FLOOR FT LAUDERDALE FL 33308											7	<u></u>		
							84	City			FL 85	Zip	Code	
 Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the ab or registered agent, or both, in the State of Florida. Such change was authorized by the familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. 						above-r the corp	named o pration's	corporati s board	on submits this statement for the purpo of directors. I hereby accept the appoin	se of changing tment as regis	j its reg tered a	gistered office agent. I am		
Sit	GNATURE ,	Signature, typed	or printed name of regi-	stered agent and life: if	applicable	(NOTE Regi	stered Agen	t signature	required w	her: reinstating)	DATE			
12			OFFIC	ERS AND DIREC			13.			ADDITIONS/CHANGES TO OFFICE	RS AND DIR	CTOF	RS IN 12	
TIT		PD			DELET	E	1.1 TITLE				Ch	ange	Addition	
NAI		MORRISON, RICHARD W.				1.2 NAM							,	
ł	REET ADDRESS	l	FEDERAL HW	Y 10 FL			1.3 STREET		i					
TITE	Y-ST-ZIP	VD VD	DERDALE FL		DELET		1.4 CITY - S 2.1 TITLE	I - ZIP	-		Ch	anne	Addition	
NAI			S MOLLIE MO	CHIRE			2 2 NAME					gc		
l	MEYERS, MOLLIE MCCLURE STREET ADDRESS 1541 N. ATLANTIC BLVD.						ADDRESS							
CIT	Y - ST - ZIP	l	DERDALE FL				2 4 CITY-5	T-ZIP						
TIT	LE	TD			DELET	E	3 1 TITLE				Ch	ange	Addition	
NAI			MARLENE				3 2 NAME							
l	EET ADORESS		E. 16TH CT.				3 3 STREET							
CH Titi	Y - ST - ZIP	SD SD	DERDALE FL		DELET	_	3 4. CITY - 5 4 1 TITLE	IT-ZIP			☐ Ch	2006	Addition	
NAI		1	STEPHAN P.		Швесен		4. 2 NAME					nige		
l	REET ADORESS	7 SE 13					4.3 STREET	ADDRESS	.					
l	Y-ST-ZIP	1	DERDALE FL				4.4 CITY - S							
TIT	ıF	D			DELET		5.1 TITLE				Ch	ange	Addition	
NAI	ME	BLANCI	HAR, RICHARD	}			5 2 NAME							
S!F	REET ADDRESS	1	TRADEWINDS				5 3 STREET	ADDRESS	;					
┢	Y-ST-ZIP	LAUDER	POALE-BY-THE	-SEA FL			5 4 CITY - S	T-ZIP	<u> </u>					
1111					DELET	€ [6.1 TITLE				☐ Cn	ange	☐ Addition	
NAI							62 NAMÉ							
l	REET ADORESS						63 STREET		5					
	Y-\$1-ZIF	u gortifu that	the information of	u uncollect units their	flog is valuntari		6 4 CITY - S		unlife for	the exemption stated in Section 110.03	(O)(I) Flacida (24-4-4-	- L. G. walland	

I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

NG OFFICER OR DIRECTOR

SIGNATURE:

1-23-96

776-3600 District Phone