NONPROFIT CORPORATION ANNUAL REPORT



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

1996 DOCUMENT # 1. Corporation Name

Principal Place of Business

749676

(3)

Mailing Address

THE GARDENS AT BONAVENTURE 14 EAST CONDOMINIUM A SSOCIATION, INC.

	LE CLUB ROAD DALE FL 33326	16614 SADDLE CLUB ROA FT. LAUDERDALE FL 3332			2 Data learners and a Confed	122 Dita et l		
					3. Date Incorporated or Qualified 11/06/1979	3a. Date of t 02/1	5/1995	
_2. Principal Pla 21	ace of Business	2a. Mailing Address		4. FEI Number 59-1977404	Applied For Not Applicable			
Suite, Apt	#, etc.	Suite, Apt. #, etc.			Certificate of Status Desired	1 1 7	3.75 Additional	
City & State		City & State		6. Flection Campaign Financing	\$5.00 May Be			
Zip Country		Zip Country		Trust Fund Contribution Added to Fees				
24	25		io Country		8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes □ No			
	9. Name and Address of Current				10. Name and Address of New Re	•		
			81	Name				
SCHILLER, LORETTA					Street Address (P.O. Box Number is Not Acceptable)			
16411 BLATT BLVD., #201								
F1. LAU	DERDALE FL 33326							
			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 _								
12.	Signature typed or printed name of registered agent a OFFICERS AND		Registered Agen	signature requi	red when reinstating) ADDITIONS CHANGES TO OFFIC	DATE	CTODE IN 12	
TITLE	P OFFICERS AND	DELETE	1.1 TITLE		ADDITIONS CHANGES TO OFFICE	Chai		
NAME	SCHILLER, LORETTA	_	1.2 NAME		DILLISTIN, C. WAYNE	:	Tago A Tiodilloon	
STREET ADDRESS	16411 BLATT BLVD. #201		1.3 STREET	ADDRESS	16411 BLATT BLUD #	203		
CITY - ST - ZIP	FT. LAUDERDALE FL 33326		1.4 CITY-S	r - 2iP	FTLANDERDALE FL 33	326		
TITLE	S	□ DELETE	2 1 TITLE	1	V	⊠ Char	nge 🔲 Addition	
NAME	KOZLOWSKY, EDWARD		2 2 NAMÉ	16	CREENSPAN, MARK 16401 BLATT BLVD # 2) nV		
STREET ADDRESS	16431 BLATT BLVD. #204		23 STREFT	. IDD. ILOO				
CITY - ST - ZIP	FT. LAUDERDALE FL 33326		2 4 CITY - S	T-ZIP F	-T LAVOER DALE FL 3.	3326		
TITLE	D	☐ DELETE	3 1 TITLE		***	★ Char	nge 🔲 Addition	
NAME	GREENSPAN, MARK		3 2 NAME		KRAMER HERMAN 16641 BLATT BLVD	# 103		
STREET ADDRESS	16401 BLATT BLVD #204		3 3 STREET					
C-TY - ST - ZIP TITLE	FT. LAUDERDALE FL VP	DELETE	3.4. CHTY+S 4.1 TITLE		ET LANDERDALE FL	33324 ⊠ Char	nge Maddition	
NAME	KRAMER, HERMAN		4 2 NAME		D PAUFER NORMAN		ige Addition	
STREET ADDRESS	16641 BLATT BLVD. #103		43 STREET	ADDRESS /	LAUFER, NORMAN 16491 BLATT BLID #	204		
C-TY-ST-ZIP	FT. LAUDERDALE FL 33326		4.4 CITY - ST		FT LAUDERDALE FL			
TITLE	DP	DELETE	5 1 TITLE			☐ Char	nge Addition	
NAME	LAUFER, NORMAN		5.2 NAME			_		
STREET ADDRESS	16491 BLATT BLVD. #204		53 STREET	ADORESS				
CITY-ST-ZIP	FT. LAUDERDALE FL 33326	·	5.4 CITY - ST	F-ZIP				
TITLE	Τ	DELETE	61 TITLE			Char	nge 🔲 Addition	
NAME	SCHMIERER, HORTENSE		6 2 NAME					
STREET ADDRESS	16431 BLATT BLVD. #202		63 STREET	ADDRESS				
C-TY-ST-Z-P	FT. LAUDERDALE FL 33326	AL AL'S FILE STATE OF THE STATE	64 CITY - S			310.63 51 11 5		
14. 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 charged or on an attachment with an address.								

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR