

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **742263** (7)

1. Corporation Name

**SADDLE CLUB GARDEN APARTMENTS AT BONAVENTURE 41
CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business

Mailing Address

C/O BUDCO
16614 SADDLE CLUB RD.
FT. LAUDERDALE FL 33326
US

C/O BUDCO
16614 SADDLE CLUB RD.
FT. LAUDERDALE FL 33326
US

3. Date Incorporated or Qualified

04/03/1978

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-1913101

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

City & State

City & State

23

28

6. Election Campaign Financing
Trust Fund Contribution

☐

**\$5.00 May Be
Added to Fees**

24

25

29

30

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes

☒

Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**BUDCO
16614 SADDLE CLUB ROAD
FT. LAUDERDALE FL 33326**

81 Name

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

83

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

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 **LUBARSKY, PHILIP**
STREET ADDRESS **16168 LAUREL DRIVE #201**
CITY-ST-ZIP **FT. LAUDERDALE FL**

TITLE **DST** ☐ DELETE
NAME **VOTA, BILL**
STREET ADDRESS **16240 LAUREL DR. #201**
CITY-ST-ZIP **FT. LAUDERDALE, FL 0**

TITLE **D** ☐ DELETE
NAME **COHEN, BERNARD**
STREET ADDRESS **16178 LAUREL DRIVE #103**
CITY-ST-ZIP **FT. LAUDERDALE FL**

TITLE **D** ☐ DELETE
NAME **FILKOFF, GAY**
STREET ADDRESS **16254 LAUREL DR #102**
CITY-ST-ZIP **FT. LAUDERDALE FL**

TITLE **DP** ☐ DELETE
NAME **BARON, MURRAY**
STREET ADDRESS **16178 LAUREL DRIVE**
CITY-ST-ZIP **FT LAUDERDALE FL**

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

D FETTERMAN, HERBERT
16206 LAUREL DRIVE #101
FT LAUDERDALE, FL 33326

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 changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

MURRAY BARON PRES 2/6/96 384-0658

CR2E037 (12/95)