

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 # 758560 (7)  
1. Corporation Name  
DORCHESTER AT POINCIANA CONDOMINIUM ASSOCIATION,  
INC.



Principal Place of Business

% PMS CORP.  
3150 VIA POINCIANA DRIVE  
LAKE WORTH FL 33467

Mailing Address

% PMS CORP.  
3150 VIA POINCIANA DRIVE  
LAKE WORTH FL 33467

3. Date Incorporated or Qualified  
05/28/1981

3a. Date of Last Report  
02/22/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

29 Zip

30 Country

4. FEI Number  
59-2166052

Applied For  
Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution

☐

\$5.00 May Be  
Added to Fees

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

PROPERTY MGMT.SERVICES  
8299 CORAL WAY  
MIAMI FL 33155

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 PD  
NAME DOKTON, JAMES  
STREET ADDRESS 3286 ARCARA WAY, #416  
CITY-ST-ZIP LAKE WORTH, FL 00000

☒ DELETE

1.1 TITLE PD  
1.2 NAME GELIN, ALVIN  
1.3 STREET ADDRESS 3286 ARCARA WAY  
1.4 CITY-ST-ZIP LAKE WORTH, FL.

☐ Change

☐ Addition

TITLE D  
NAME GOLDBERG, LEO  
STREET ADDRESS 3286 ARCARA WAY, #402  
CITY-ST-ZIP LAKE WORTH, FL 00000

☒ DELETE

2.1 TITLE D  
2.2 NAME PELLIGRINI, FRANK  
2.3 STREET ADDRESS 3286 ARCARA WAY  
2.4 CITY-ST-ZIP LAKE WORTH, FL.

☐ Change

☐ Addition

TITLE VD  
NAME PELLEGRINI, FRANK  
STREET ADDRESS 3286 ARCARA WAY  
CITY-ST-ZIP LAKE WORTH FL

☐ DELETE

3.1 TITLE SD  
3.2 NAME KAUFMAN, HERBERT  
3.3 STREET ADDRESS 3286 ARCARA WAY  
3.4 CITY-ST-ZIP LAKE WORTH FL

☐ Change

☐ Addition

TITLE SD  
NAME WEXLER, JOYCE  
STREET ADDRESS 3286 ARCARA WAY, #111  
CITY-ST-ZIP LAKE WORTH FL

☐ DELETE

4.1 TITLE TD  
4.2 NAME WEXLER, IRV  
4.3 STREET ADDRESS 3286 ARCARA WAY  
4.4 CITY-ST-ZIP

☐ Change

☐ Addition

TITLE TD  
NAME GELIN, ALVIN  
STREET ADDRESS 3286 ARCARA WAY, #212  
CITY-ST-ZIP LAKE WORTH FL

☒ DELETE

5.1 TITLE D  
5.2 NAME BINETTI, RAY  
5.3 STREET ADDRESS 3286 ARCARA WAY  
5.4 CITY-ST-ZIP LAKE WORTH, FL.

☐ Change

☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

☐ DELETE

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

☐ Change

☐ Addition

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, 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

2/8/96  
Date

407-967-1372  
Daytime Phone #

CR2E037 (12/95)