

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 # 707508 (8)
1. Corporation Name
COLONIAL MANOR CONDOMINIUM OF HOLLYWOOD, INC.

Principal Place of Business

3500 MONROE STREET
HOLLYWOOD FL 33021

Mailing Address

3500 MONROE STREET
HOLLYWOOD FL 33021



| | | | |
|--------------------------------|---------------------|---------------------|---------------------|
| 2. Principal Place of Business | | 2a. Mailing Address | |
| 21 | Suite, Apt. #, etc. | 26 | Suite, Apt. #, etc. |
| 22 | City & State | 27 | City & State |
| 23 | Zip | 28 | Country |
| 24 | Country | 29 | Zip |
| 25 | | 30 | |

| | |
|---|--|
| 3. Date Incorporated or Qualified 06/30/1964 | 3a. Date of Last Report 01/31/1995 |
| 4. FEI Number 59-2358389 | Applied For <input type="checkbox"/> Not Applicable |
| 5. Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required |
| 6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> | \$5.00 May Be Added to Fees |
| 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No | |

9. Name and Address of Current Registered Agent

VILA, LOUIS
3500 MONROE ST
HOLLYWOOD FL 33021

10. Name and Address of New Registered Agent

| | | | |
|---|-----------------------|-------|--------------------------|
| 81 Name | JOHN C. FERRY | | |
| 82 Street Address (P.O. Box Number is Not Acceptable) | 3500 MONROE ST | | |
| 83 | | | |
| 84 City | HOLLYWOOD | 85 FL | 86 Zip Code 33021 |

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 *John C. Ferry* **JOHN C. FERRY, President 2-18-96**
(NOTE: Registered Agent signature required when reinstating)

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 |
|----------------------------|---|--|
| TITLE | PD <input checked="" type="checkbox"/> DELETE | 1.1 TITLE President & D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | VILA, LOUIS | 1.2 NAME JOHN C. FERRY |
| STREET ADDRESS | 3500 MONROE ST. | 1.3 STREET ADDRESS 3500 MONROE ST |
| CITY-ST-ZIP | HOLLYWOOD FL | 1.4 CITY-ST-ZIP HOLLYWOOD, FL. 33021 |
| TITLE | D <input checked="" type="checkbox"/> DELETE | 2.1 TITLE VICE President & D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | UGOLINO, MARY | 2.2 NAME FRANK WARD |
| STREET ADDRESS | 3500 MONROE ST | 2.3 STREET ADDRESS 3500 MONROE ST |
| CITY-ST-ZIP | HOLLYWOOD, FL 00000 | 2.4 CITY-ST-ZIP HOLLYWOOD, FL. 33021 |
| TITLE | SD <input checked="" type="checkbox"/> DELETE | 3.1 TITLE TREASURER & D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | MCGIVNEY, FRANCES | 3.2 NAME FERNANDE BELANGER |
| STREET ADDRESS | 3500 MONROE ST | 3.3 STREET ADDRESS 3500 MONROE ST |
| CITY-ST-ZIP | HOLLYWOOD, FL 00000 | 3.4 CITY-ST-ZIP HOLLYWOOD, FL. 33021 |
| TITLE | D <input checked="" type="checkbox"/> DELETE | 4.1 TITLE SECRETARY & D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | GINDEL, WILLAM | 4.2 NAME BONNIE DEPINTO |
| STREET ADDRESS | 3500 MONROE ST | 4.3 STREET ADDRESS 3500 MONROE ST |
| CITY-ST-ZIP | HOLLYWOOD, FL 00000 | 4.4 CITY-ST-ZIP HOLLYWOOD, FL. 33021 |
| TITLE | VD <input checked="" type="checkbox"/> DELETE | 5.1 TITLE 000001746200 <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | HUSTON, DOROTHY | 5.2 NAME -03/18/96--01022--007 |
| STREET ADDRESS | 3500 MONROE ST | 5.3 STREET ADDRESS ***61.25 |
| CITY-ST-ZIP | HOLLYWOOD, FL 00000 | 5.4 CITY-ST-ZIP |
| TITLE | <input type="checkbox"/> DELETE | 6.1 TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | | 6.2 NAME |
| STREET ADDRESS | | 6.3 STREET ADDRESS |
| CITY-ST-ZIP | | 6.4 CITY-ST-ZIP |

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: *John C. Ferry* **JOHN C. FERRY 2-18-96**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (12/95)

3-15-1996