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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

760674

(2)

1. Corporation Name SOUTHLAKE I CONDOMINIUM ASSOCIATION, INC.						
Principal Place	of Business	Mailing Address		1 100 111 100 to 0 2548 0 8110 E1111 100)	
1 VIA DE CASAS SUR BOYNTON BEACH FL 33426		1 VIA DE CASAS SUR BOYNTON BEACH FE 39426				
====				3. Date Incorporated or Qualified 11/13/1981		Report 995
2. Principal Pl. 21	ace of Business	26 Mailing Address P	Top Mant	4. FEI Number		Applied For Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	ie Hur the	Certificate of Status Desired		5 Additional Required
City & State	9	City & State	71	6. Election Campaign Financing	_ \$5.0	May Be
23		28 CAKE WOR	4,+6	Trust Fund Contribution	1 1 '	d to Fees
Zp	Country	32(1/A	Country	8. This corporation has liability for		. 199.032,
24	9. Name and Address of Current	Registered Agent	30 454	Florida Statutes 10. Name and Address of New I	Yes (IS) No	
*	3. 114110 4712 71401000 07 04110111	Trogiotorea Agent	81 Name	10. Name and Address of New a	negistered Agent	
ASSOCIATED PROPERTY MGMT. 400 S. DIXIE HWY SUITE 10 LAKE WORTH FL 34460			82 Sheet Ac	Adaress (P.O. Box Number is Not Acceptable)		
LAKE W	UNITI PE 34460		84 City		E1 85 Zij	p Code
44 0		1017 1500 51 11 01 11			FL "	
or register familiar with SIGNATURE	to the provisions of Sections 617.0502 and agent, or both, in the State of Floridath, and accept the obligations of, Section Specific Section 1986.	a Such change was authorize on 617.0503, Florida Statutes	d by the corporation's bo	poration submits this statement for the pull oard of directors. Thereby accept the app	urpose of changing its r pointment as registered	registered office I agent. I am
or register familiar with SIGNATURE	red agent, or both, in the State of Florida th, and accept the obligations of Section Signature sylved or printed name of registeric agent a OFFICERS AND	a Such change was authorize on 617.0503, Florida Statutes and the dags states (NOI	s, the above-named corp d by the corporation's bo E. Registated Agent squakers rep 13.	eard of directors. Thereby accept the app	rpose of changing its r continent as registered	l agent. I am
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certify that the information indicated on this afritual report or supplemental arritual report is true and accurate and that my signature shall have the same legal effect as it 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: _

3-21-96

Daytme Prior 6 #