

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

1996 4-8-96

DIVISION OF CORPORATIONS

DOCUMENT # N93000001734 (3)

1. Corporation Name

REGENCY HALL CONDOMINIUM APARTMENTS, INC.

Principal Place of Business

Mailing Address

1155-97 ST.
BAY HARBOR ISLAND FL 33154
US

1155-97 ST.
BAY HARBOR ISLAND FL 33154
US



3. Date Incorporated or Qualified

04/19/1993

3a. Date of Last Report

05/01/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

4. FEI Number

59-1280525

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$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

MORCHELIES, CAROL
1155-97 ST.
#301
BAY HARBOR ISLAND FL 33154

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

TITLE ☐ DELETE

NAME PD
MORCHELIES, CAROL
STREET ADDRESS 1155-97 ST. #301
CITY-ST-ZIP BAY HARBOR FL

TITLE ☐ DELETE

NAME D
SWEET, ARTHUR
STREET ADDRESS 1155 97TH ST #203
CITY-ST-ZIP BAY HARBOR FL

TITLE ☐ DELETE

NAME SD
ANDRADE, J.
STREET ADDRESS 1155-97 ST #503
CITY-ST-ZIP BAY HARBOR FL

TITLE ☐ DELETE

NAME VPD
PEPPER, GLADYS
STREET ADDRESS 1155 97TH ST #302
CITY-ST-ZIP BAY HARBOR FL

TITLE ☐ DELETE

NAME TD
FELSKI, JUNE
STREET ADDRESS 1155-97 ST. #501
CITY-ST-ZIP BAY HARBOR FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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:

Carol Lindo

Typed name of officer or director

4-2-96

866-5561

Date

Typed name

CR2E037 (12/95)