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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

SIGNATURE:

DOCUMENT # 743823

(7)

J 2	ONS OF BARDMOOR, INC.	, A CONDOMINIUM			
ncipal Place o	of Business	Mailing Address			
7 DEVILLE D		837 DEVILLE DR E LARGO FL 34641-1120			
				3. Date incorporated or Qualified 08/04/1978	3a. Date of Last Report 05/01/1995
Principal Plac	ce of Business	2a. Mailing Address		4. FEI Number 59-2491730	Applied For Not Applicable
Suite Apt. #	, etc.	Suite, Apt. #, etc.		Certificate of Status Desired	\$8.75 Additional
		City & State		6. Election Campaign Financing	Fee Required  \$5.00 May Be
City & State		28		Trust Fund Contribution	Added to Fees
Zip	Country	Zip	Country	8. This corporation has liability for in	ntangible tax under s. 199.032, Yes 🔲 No
	25	t Posistered Agent	30	Florida Statutes D  10. Name and Address of New Re	
	9. Name and Address of Curren	Registered Agent	81 Name	144	
	A 10114780			MCCREARY, JANI odress (P.O. Box Number is Not Acceptable	
	<del>O, IGNAZIO</del> XOMOOR BLVD-#A-		82 Street A	97 BARDHOOR	BLVD. # B
LANGO F			83		
<del>Dates</del>	E-040415		00 00 1		85 Zip Code
			84 City	ARGO	FL 34641
ramillar wit	o the provisions of Sections 617.0502 ed agent, or both, in the State of Flori h and accept the obligations of, Sect	M Control of the Cont	OS. NOTE: Registered Agent signature rec	jured when reinstaling)	DATE
Tamiliar with	sit sture, typed or printed name of registered agen	M Control of the Cont		gured when reinstalling)  ADDITIONS/CHANGES TO OFF	DATE
FAMILIAR WEST	Silfature, typed or printed name of registered agen OFFICERS AN	ano title il excabile  D DIRECTORS	NOTE: Registered Agent signature rec 13. 1.1 TITLE 12 NAME	aured when reinstalling)  ADDITIONS/CHANGES TO OFF  DP  MCCREARY, JANE	DATE  ICERS AND DIRECTORS IN 12  Change Addition
TAMHAT WE	Sill-store, typed or printed name of registered agen OFFICERS AN  ALLOGGIO, IGNAZIO 9707 BARDMOON BLVD. #A	ano title il excabile  D DIRECTORS	NOTE: Registered Agent signature res 13. 1.1 TITLE 12 NAME 1.3 STREET ADDRESS	ADDITIONS CHANGES TO OFF  ADDITIONS CHANGES TO OFF  MCCREARY, JANE  9797 BARDMOOR B	DATE ICFRS AND DIRECTORS IN 12 Change Addition
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Daytime Phone #