

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 # 749486 (7)

1. Corporation Name

PIEDMONT "I" ASSOCIATION, INC.



Principal Place of Business

Mailing Address

C/O PRIME MANAGEMENT GROUP, INC.
1051 SOUTH ROGERS CIRCLE
BOCA RATON FL 33487

C/O PRIME MANAGEMENT GROUP, INC.
1051 SOUTH ROGERS CIRCLE
BOCA RATON FL 33487

3. Date Incorporated or Qualified
10/23/1979

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

59-2004492

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

RAIBLE, RONALD
1051 SOUTH ROGERS CIRCLE
BOCA RATON FL 33487

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 not stating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
P
HOLLANDER, HARRY
STREET ADDRESS
KINGS PT. PIEDMONT I 410
CITY-STATE-ZIP
DELRAY BEACH FL

TITLE ☐ DELETE

NAME
VT
SOMMER, NAT
STREET ADDRESS
421 PIEDMONT I
CITY-STATE-ZIP
DELRAY BEACH FL

TITLE ☐ DELETE

NAME
D
SRDMAN, HY
STREET ADDRESS
387 PIEDMONT I
CITY-STATE-ZIP
DELRAY BEACH FL

TITLE ☐ DELETE

NAME
SD
SCHOENBERG, RUTH
STREET ADDRESS
KINGS PT. PIEDMONT I 402
CITY-STATE-ZIP
DELRAY BEACH FL

TITLE ☐ DELETE

NAME
D
GREENBERG, PHILIP
STREET ADDRESS
398 PIEDMONT I
CITY-STATE-ZIP
DELRAY BEACH FL

TITLE ☒ DELETE

NAME
D
PERLMUTER, MORRIS
STREET ADDRESS
KINGS PT. PIEDMONT I 412
CITY-STATE-ZIP
DELRAY BEACH FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☒ Addition

1.2 NAME
AGENT
RAIBLE, RONALD
1.3 STREET ADDRESS
6300 PARK OF COMMERCE BLVD.
1.4 CITY-STATE-ZIP
BOCA RATON, FL 33487

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-STATE-ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME
D
ERDMAN, HY
3.3 STREET ADDRESS
387 PIEDMONT I
3.4 CITY-STATE-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-STATE-ZIP
400001808203-14-96
05/06/96-01016-006
***857.50

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-STATE-ZIP

6.1 TITLE ☐ Change ☒ Addition

6.2 NAME
D
NADEL, MORRIS
6.3 STREET ADDRESS
408 PIEDMONT I
6.4 CITY-STATE-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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)