## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham

oangra b. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N95000002748 (0)

DORCHESTER G CONDOMINIUM ASSOCIATION, INC.

FILED Feb 26 1998 8:00am Secretary of State

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(C) 1 100 E17A

Principal Place of Business Mailing Address									I IDDAKABA DAB IDADA DAKA BUKA BUKA BUKA DUKAK	<b>     </b>		OLD DI EDIT HODI	
DORCHESTER G CONDO. DORCHESTER G CONDO									3. Date Incorporated or Qualified				
APT 156		6 DORCHESTER G	OORCHESTER G				06/12/1995						
WST PALM BEACH FL 33417 WEST PALM BEACH FL 334 US US						17			4. FEI Number		ΠA	Applied For	
Vo			U\$	•					59-1637962		$\rightarrow$	lot Applicable	
2. Principal f	Place of Busin	1055	2a.	2a. Mailing Address						\$i	3.75	Additional	
21				26				.`	Continuate of Status Desired		Fee P	Required	
Suite, Apt. #, etc.				Suite, Apt. #, etc.				6	Election Campaign Financing     Total Contains			Мау Ве	
City & State				City & State								to Fees	
23				28				- 1'	7. Is this nonprofit corporation a homeowners association?				
Zip	Country			Zip Cou			intry		B. This corporation owes or has paid t	the current	∕ear Ir	ntangible	
24	25			29 30					Personal Property Tax due June 30.  Yes  No				
9. Name and Address of Current Registered Agent								10	10. Name and Address of New Registered Agent				
						81	Name						
SHOVERS, ILEANE					1	82	Street	Address (	(P.O. Box Number is Not Acceptable)	· <del></del>			
DORCHESTER G. CONDOMINIUM						83			· · · · · · · · · · · · · · · · · · ·				
156 DORCHESTER G. West Palm BCH FL 33417													
WEST F	ALM DOLL I	-C 3341/				84	City			FL 85	Zip	Code	
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, office or registered agent, or both, in the State of Florida. Such change was auth							l e-named	corporati	ion submits this statement for the purp		nging	its registered	
office or agent. I a	registered ag am <i>lam</i> itiar wi	ent, or both, in the State th, and accept the oblig	e of Florid Dations o	da. Such change was f. Section 617.0503. Fi	d by utes	/ the corp s.	poration's						
SIGNATURE	Duo DKA	7-62		,					2-/2 DATE	-9	8		
	Signature, typed	or printed same of registered ag	ent and title		E: Registered	i Age	ant signature	required who					
12.	1 12	OFFICERS AN	ID DIREC		13.			1 <del> "</del>	ADDITIONS/CHANGES TO OFFICER				
TITLE	VD NITH ALBERT						TITLE BOY		NEY, BETTY	LJ (	Change	Addition	
NAME RUTH, ALBERT STREET ADDRESS DORCHESTER G. 149				12 NA			[ ]		DORCHESTER	G			
CITY-ST-ZIP WEST PALM BEACH FL							ADDRESS	W. P.B. +L 33417					
TITLE	T TALM DENOTITE			1.4 DELETE 2.1			. O( Zii		RD MEMBER	<b>D8</b> (	Change	☐ Addition	
NAME	SWART, ISRAEL			2.2 h									
STREET ADDRESS	BOOK FORES O 444						2.3 STREET ADDRESS 14		DORCHESTER	6			
CITY-ST-ZIP	14-0- DALLA DELOLI EL			2.4(			2. 4 CITY-ST-ZIP W		P.B. FL. 33417				
TITLE	В			DELETE 3.1			3.1 TITLE		<del>*************************************</del>	<b>E</b> (	hange	☐ Addition	
NAME	SOLOMON, NORMA			3.2 N			3.2 NAME		LOMON NORMA DORCHESTER (	2			
STREET ADDRESS				3.3 \$			1.3 STREET ADDRESS		DORCHOSTER	3 	_		
CITY-ST-ZIP									ST PALM BEACH				
TITLE	PD			☐ DELETE	4.1 TIT					Ц	hange	Addition	
NAME	SHOVERS, ILEANE DORCHESTER G 156						2 NAME						
STREET ADDRESS	400000000000000000000000000000000000000				4.3 STREET ADDRESS								
CITY-ST-ZIP TITLE	VD VD	NUM DUTI FL	<del></del> .	☐ DELETE	4.4 CIT		T-ZIP				hange	Addition	
NAME		NANKERVIS			4						Harryo		
NAME GRACIE, NANKERVIS STREET ADDRESS 162 DORCHESTER G.					5.2 NAME 5.3 Street addres								
CITY-ST-ZIP WEST PALM BEACH FL					5.4 CITY-ST-ZIP								
TITLE	1	-and argorithm 1 to		☐ DELETE	6.1 TIT		1 4.17				hange	Addition	
NAME	DIPALMA	, MARIE		_	6.2 NA						•		
STREET ADDRESS 164 DORCHESTER G.					1		ADDRESS						

CITY-ST-ZIP
 WEST PALM BEACH FL
 14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental 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.