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**NONPROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 743839

1. Corporation Name

THE BRIGHTON CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

BRIGHTON CONDO MINIMUM ASS INC
2000 NORTH OCEAN BLVD
BOCA RATON FL 33431

Mailing Address

BRIGHTON CONDO MINIMUM ASS INC
2000 NORTH OCEAN BLVD
BOCA RATON FL 33431



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

30 Country

3. Date Incorporated or Qualified

08/07/1978

4. FEI Number

59-1955459

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

9. Name and Address of Current Registered Agent

HUNT, COOK R MEHR &
2200 CORPORATE BLVD N.W., STE 402
2255 GLADES ROAD
BOCA RATON FL 33431

10. Name and Address of New Registered Agent

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 PD ☒ DELETE
NAME FARKAS, PAUL
STREET ADDRESS 2000 N. OCEAN BLVD., #605
CITY-ST-ZIP BOCA RATON FL

TITLE STD ☐ DELETE
NAME SCHWARTZ, FRITZI
STREET ADDRESS 2000 N. OCEAN BLVD., #201
CITY-ST-ZIP BOCA RATON FL

TITLE VPD ☐ DELETE
NAME FRENOUT, R. D
STREET ADDRESS 2000 N. OCEAN BLVD., #102
CITY-ST-ZIP BOCA RATON FL

TITLE TD ☐ DELETE
NAME REIFER, CHARLES
STREET ADDRESS 2000 N. OCEAN BLVD., #504
CITY-ST-ZIP BOCA RATON FL

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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 TD ☒ 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 PD ☒ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

5.1 TITLE STD ☐ Change ☒ Addition
5.2 NAME Clemente, Thomas
5.3 STREET ADDRESS 2000 N. Ocean Blvd. #502
5.4 CITY-ST-ZIP Boca Raton, FL 33431

6.1 TITLE Director ☐ Change ☒ Addition
6.2 NAME Schwellinger, Jerome
6.3 STREET ADDRESS 2000 N. Ocean Blvd. #402
6.4 CITY-ST-ZIP Boca Raton, FL 33431

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(5)(i), 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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

Charles Reifer Pres. 2-8-99 561-392-0155

CR2E037 (11/98)