FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT **CORPORATION ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 405675 THE CONDO NEWS, INCORPORATED

FILED Feb 04 1998 8:00am Secretary of State

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Principal Place	of Business		Mailing Address				d interif fillig tiblat firting first taget i		111 61911 61611	1 61614 1061
2000 N FL MANGO ROAD. STE 203 (33409) 2000 N FL MANGO ROAD. S P.O. BOX 109 P.O. BOX 109 WEST PALM BEACH FL 33402 WEST PALM BEACH FL 33402				,		DO NOT WRITE IN THIS SPACE				
17601 171541 6						3. D	Date Incorporated or Qualified			
							07/26/1972			
2. Principal Pl	ace of Business	2:	. Mailing Address			4. F	El Number		· · · ·	oplied For
21		26		······			<u>59-1415134</u>			t Applicable
Suite, Apt. 4		27	Suite, Apt. #, etc.			5. C	Certificate of Status Desired		\$8.75 A	equired
City & State	1	<u> </u>	City & State			1 -	lection Campaign Financing	m	\$5.00	
23	1 0	26	7	Coun			rust Fund Contribution		Added t	
Zip	Country	<u> </u>	Žip I	Coun	ıry		his corporation owes or has p Personal Property Tax due Jun	_		angible TNo
24	25 Name and Addres	29	elered Ageni	30			lame and Address of New R			
			atelen Agein		1 Name		and and Address of from the	OBIOTOTO IN	JOIN	
)umas, catherine Springdale circl									
	M SPRINGS FL 3346				Stree	Address (P.U). Box Number is Not Accepta	adie)		
					'*					
				[4 City			FL	85 Zip (Code
11. Pursuant t	o the provisions of Sect	ons 607.0502 and	607.1508, Florida Stati	utes, the abo	ove-name	d corporation s	submits this statement for the ard of directors. I hereby acc		hanging it	s registered
office or re	egistered agent, or both in familiar with, and acce	, in the State of Flor ept the obligations	rida. Such change wa s of, Section 607,05 0 5, f	s authorized Florida Statu	by the co tes.	orporation's boa	ard of directors. I hereby acc	ept the appoi	ntment as	registered
SIGNATURE		- Fr	- ,							1
SIGNATURE .	Signature typed or printed name	of registered agent and ti	ie it applicable (NG	OTF Registered	Agent signal.	ire required when rei		DATE		
12.		FICERS AND DIRE		13.		AD	DDITIONS/CHANGES TO OFF			
TITLE	PD	_	DELETE	1.1 T(T)	E			L	Change	Addition
NAME	HEACOCK, JERRY			1.2 NAN						Į
STREET ADDRESS	131 SPRINGDALE			1.3 S1R	EE1 ADDRESS	>				1
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TITLE	5		L DELETE	2.1 TITL				L	Change	Addition
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TITLE	a i		☐ DELETE	6.1 TITL				L	Change	Addition
NAME	, ,			6.2 NAN						
STREET ADDRESS				6.3 STR	EET ADDRESS	\$ 				

14. I hereby certify that the information supplied with this filing 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 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with a paddress.

CATHERINE E. 720MMS, SECRETARY