

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

95 MAR -2 PM 4:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 703796 (3)

1. Corporation Name

CORONET TERRACE APARTMENTS INC

Principal Place of Business

2245 PIERCE STREET
HOLLYWOOD FL 33020

Mailing Address

2245 PIERCE STREET #5
HOLLYWOOD FL 33020

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

03/27/1962

3a. Date of Last Report

02/02/1994

4. FEI Number

59-2070938

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

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☐

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes

☒ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

22 City & State

23

Zip

Country

2a. Mailing Address

25

Suite, Apt. #, etc.

27 City & State

28

Zip

Country

9. Name and Address of Current Registered Agent

ADAMSON, BARBARA J.
2245 PIERCE ST
APT 5
HOLLYWOOD FL 33020

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

Barbara J. Adamson

2-21-95

(Signature, typed or printed name of registered agent and title)

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	P
NAME	LOGIOS, ANDREW
STREET ADDRESS	2245 PIERCE ST. #4
CITY-ST-ZIP	HOLLYWOOD FL
TITLE	D
NAME	FARRELL, EDWARD
STREET ADDRESS	2243 PIERCE ST., #7
CITY-ST-ZIP	HOLLYWOOD FL
TITLE	D
NAME	PELLERIM, JULIETTE
STREET ADDRESS	2243 PIERCE STREET, APT 12
CITY-ST-ZIP	HOLLYWOOD FL
TITLE	S
NAME	BRAINERD, DOROTHY
STREET ADDRESS	2245 PIERCE ST. #2
CITY-ST-ZIP	HOLLYWOOD FL
TITLE	D
NAME	DRAGO, SALVATORE
STREET ADDRESS	2243 PIERCE ST., #10
CITY-ST-ZIP	HOLLYWOOD FL
TITLE	S
NAME	ADAMSON, JEROME
STREET ADDRESS	2245 PIERCE ST. #5
CITY-ST-ZIP	HOLLYWOOD FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	5/7	☐ Change ☒ Addition
1.2 NAME	ADAMSON, BARBARA J.	
1.3 STREET ADDRESS	2245 PIERCE ST. #5	
1.4 CITY-ST-ZIP	HOLLYWOOD, FL. 33020	
2.1 TITLE		☐ 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	D	☒ Change ☐ Addition
4.2 NAME	BRAINERD, DOROTHY	
4.3 STREET ADDRESS	2245 PIERCE ST. #2	
4.4 CITY-ST-ZIP	HOLLYWOOD, FL. 33020	
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE	D	☒ Change ☐ Addition
6.2 NAME	ADAMSON, JEROME	
6.3 STREET ADDRESS	2245 PIERCE ST. #5	
6.4 CITY-ST-ZIP	HOLLYWOOD, FL. 33020	

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 110.07(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:

Barbara J. Adamson
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
BARBARA J. ADAMSON

2-21-95

929-6712