FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 703971

ILLINO	DIS APARTMENTS, INC.							
Principal Place of Business Mailing Address 1501 SE 15TH COURT 500 E. SPANISH ROVER BL DEERFIELD BEACH FL 33432 SUITE 18 US BOCA RATON FL 33431-455								
		US			3. Date Incorporated or Qualified 05/01/1962	3a. Date of Last 04/10/1		
2. Principal F	Place of Business	2a. Mailing Address			4. FEI Number 59-1879079	Applied For Not Applicable		
- Suite, Apt.	#, elc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	\$8.75	Additional Regulred
City & Stat	le	City & State			Election Campaign Financing Trust Fund Contribution		0 May Be	
Zip 24	Country 25	Zip Country 29 30				8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes		
	9. Name and Address of Curren					10. Name and Address of New Regis		
Vani 140	COMPOT W		81	Name	41		<u> </u>	
BEACO	ERNEST W. N PROPERTY MANAGEMENT				Address (P.O. Box Number is Not Acceptable)			
	Spanish river blvd #18 Naton Fl 33431		83 84				log 1 7:	- Codo
·				FL V E S S S S S S S S S			'	
office or agent. I s	to the provisions of Sections 617.0503 registered agent, or both, in the State im familiar with, and accept the obligation in the college the college in the college in t	2 and 617.1508, Florida Statutes of Florida. Such change was au ations of, Section 617.0503, Flori	s, the abov thorized b ida Statute	e-named y the corp s.	corpo	ration submits this statement for the purp n's board of directors. I hereby accept th	oose of changing ne appointment a	its registered as registered
SIGNATURE	Signature, typed or printed name of registered ager	ot and tills if anclicable (APATE)	One interest As			when reinstating)	A.I.F.	
12.	OFFICERS AND	· · · · · · · · · · · · · · · · · · ·	13.	eni signatore	required	ADDITIONS/CHANGES TO OFFICER	DATE	3DC IN 12
TITLE	D	DELETE 1.1					Change	
NAME	VILLARI, LEO J		1.2 NAME			ry Armstrong		, gg riobilion
STREET ADDRESS	44 BIRCH HILL RD			T ADDRESS		01 SE 15th Court #204		
CITY-ST-ZIP	BELMONT MA		1.4 DITY+		De	erfield Beach, FL 3344	41.	
TITLE	VD	DELETE	2.1 TITLE	31-11			☐ Change	Addition
NAME	SATERIALE, PATRICIA		2.2 NAME				L onong.	7.00.110.1
STREET ADDRESS	1501 SE 15TH CT #502			T ADDRESS				
CITY-ST-ZIP	OPERATE D. DEACH EL			2.4 CITY+ST-ZIP				
TITLE	STD	DELETE 3.1					☐ Change	Addition
NAME	SMITH, CHRISTINE		3.2 NAME	- 1				
STREET ADDRESS	1501 S.E. 15TH CT. #302		3.3 STREE	T'ADDRESS				
CITY-ST-ZIP	DEERFIELD BEACH FL		3.4. CITY-	ST-ZIP				
TITLE	Ď	X) DELETE	4.1 TITLE				☐ Change	Addition
NAME	CONNOLLY, JOHN		4.2 NAME					
STREET ADDRESS	1501 SE 15TH CT #102		4.3 STREET ADDRESS					
CITY-ST-ZIP	DE ERFIELD BCH. FL		4.4 CITY- S	ST-ZIP				
TITLE	PD	DELETE	5.1 TITLE				☐ Change	Addition
NAME (1)	PALARCHIO, ARTHUR		5.2 NAME					
STREET ADDRESS	24603 EDGEWOOD DR		5.3 STREET	ADDRESS				ļ
CITY-ST-ZIP	NOVI MI		5.4 CITY-5	ST-ZIP				
TITLE	1	DELETE	6.1 TITLE				☐ Change	Addition
NAME			6.2 NAME					1
STREET ADDRESS			6.3 STREET	ADDRESS				
CITY+ST-ZIP			64 CITY S	1.7IP				Ĭ

I do 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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

FILED

Apr 10 1997 8:00am

Secretary of State