NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

1999 DOCUMENT

1. Corporation Name

JACKSON MANOR APARTMENTS NO. 2 CONDOMINIUM ASSOC IATION, INC.

Principal Place of Business JACKSON MANOR #2 2238 ADAMS ST APT 6 HOLLYWOOD FL 33020

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

22

23

Mailing Address

6281 DAGENAIS, #4 MONTREAL-NORTH MONTREAL CA 33323

2a. Mailing Address ---

Suite, Apt. #, etc.

City & State

26

27

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FILED Aug 13, 1999 8:00 am Secretary of State

08-13-1999 90012 041 ****61.25

605694 - 90012 - 41

Date Incorporated or Qualifed 07/06/1964

NOT APPLICABLE

5. Certifcate of Status Desired

FEI Number



BARBIERI, MICHELE 2238 ADAMS ST APT 6 HOLLYWOOD FL 33020 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 register 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 register agent, and familiar with, and accept the obligations of, Section 617.0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE SIGNATURE OFFICERS AND DIRECTORS 12. OFFICERS AND DIRECTORS TIME PD DELETE 1.1 TIME DELETE 1.1 TIME DINUNZIO, ROSE 6281 DAGENAIS, #4 13 STREET ADDRESS 6281 DAGENAIS, #4 13 STREET ADDRESS 6281 DAGENAIS, #4 13 STREET ADDRESS 876E TADDRESS 876E TADD	ZIP	Country	Zip	_	Country		6. Election	Campaign Financing		\$5.00	May Be
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2238 ADAMS ST APT 6 HOLLYWOOD FL 33020 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 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 register agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE SIGNATU					81	Name					
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11. Pursuant to the provisions of Sections 617 0502 and 617 1508. Florids Statutes, the above-named corporation submits this statement for the purpose of changing its registered agent, or both, in the State of Florids. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as register agent 1 am familiar with, and accept the obligations of, Section 617 0503, Florids Statutes. Signatures, Special accept the obligations of, Section 617 0503, Florids Statutes. Signatures agent 1 am familiar with, and accept the obligations of, Section 617 0503, Florids Statutes. Signatures agent 1 am familiar with, and accept the obligations of, Section 617 0503, Florids Statutes. Signatures agent 1 am familiar with, and accept the obligations of, Section 617 0503, Florids Statutes. Signatures agent 1 am familiar with, and accept the obligations of, Section 617 0503, Florids Statutes. The purpose of changing its register agent 12. SIGNATURE		• • • • • • • • • • • • • • • • • • • •	83								
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 register 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 register agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. SIGNATURE Signature, typed or printed reams of registered agent and title if applicable. OFFICERS AND DIRECTORS 12. OFFICERS AND DIRECTORS TITLE PD ONNUZIO, ROSE GERI DAGENAIS, #4 MR-NORTH OU HIG 1 TITLE SD OFFICE, LINA STREET ADDRESS 8760 DUNFROST ST-LEONARD QU HIP - 2 7.5 ST-LEONARD QU HIP - 2	1,022111	1000 1 2 00020									
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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 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 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 supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(ii), Florida Statutes. I further certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(iii), Florida Statutes. I further certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(iiii), Florida Statutes. I further certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(iiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiiii	14. I herehv	certify that the information supplied w	ith this filing does not	gualify for the			Section 119.07(3	(i), Florida Statutes. I	further certify	that the in	formation

n report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am all trustee <u>empowered to execute</u> this report as required by Chapter 617, Florida Statutes; and that my name appears in <u>≺with an</u> address, with all other like smpowered. officer or director of the corporation or the receiver. Block 12 or Block 13 if changed, or on an attachm

SIGNATURE:

Daytime Phone #

Applied For

\$8.75 Additional

Fee Required

Not Applicable