FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

709122

(6)

FILED Mar 18 1998 8:00am Secretary of State

NC. Principal Place of Business Malling Address							
	e oi business	Mailing Address					
BEACH 4801 FOREST HILL BLVD. W. PALM BEACH FL 33415		BEACH 4601 FOREST HILL BLVD. W. PALM BEACH FL 33415				3. Date Incorporated or Qualified 06/11/1965 4. FEI Number Applied For	
2. Principal Place of Business		2a. Mailing Address 26				59-1001013 Not Applicate 5. Certificate of Status Desired See Regulated Fee Regulated	10
Suite, Apt. #, etc.		Suite, Apt. #, etc.				Election Campaign Financing Trust Fund Contribution Added to Fees	
City & State		City & State				7. Is this nonprofit corporation a homeowners association? Yes No	
Zip 24			30 Co.	Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No	-
241	9. Name and Address of Curre	29 29 Agent	1301	т		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent	—
	2. 1300th Stift Longing At Abita	III HOMENIAA MANIN		81 Na	me	10. Hand Sild Decreas of last to Branish State	—
ARNOLD, C. WARREN 7076 BOBALINK COURT						ass (P.O. Box Number is Not Acceptable)	
1	ORTH FL 33467			83			
				84 Cit	-	FL 85 Zip Code	
SIGNATURE		men Chr	nal	a		oration submits this statement for the purpose of changing its registered on's board of directors. I hereby accept the appointment as registered of the statement of the stateme	d _
12.		ND DIRECTORS	13.			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	DELETE	1.1 TI	ITLE		☐ Change ☐ Additi	on
NAME	BEATY, LEONARD H.		1.2 N	IAME			
STREET ADDRESS	2542 HAVENWOOD		1.3 S	STREET ADORE	ess		
CITY-ST-ZIP	W. PALM BEACH FL		1.40	ITY-ST-ZIP			
TITLE	VD	☐ DELETE	2.1 T/	2.1 TITLE		☐ Change ☐ Addition	on
NAME	HIGGS, JAMES L.		2.2 N	IAME			
STREET ADDRESS	5917 ST.BARBARA ST.		2.3 \$	TREET ADDRE	ESS		
CITY-ST-ZIP	W. PALM BEACH FL			CITY-ST-ZIP			
TITLE	TD	☐ DELETE	3.1 Ti	ITLE		☐ Change ☐ Addition	on
NAME	ARNOLD, C. WARREN		3.2 N	IAME	- 1		
STREET ADDRESS	3703 HERTFORD COURT		3.3 \$	TREET ADDRE	ESS		
CITY-ST-ZWP	LAKE WORTH FL			CITY-ST-ZIP			
TITLE		DELETE	4.1 TI	ITLE		☐ Change ☐ Addition	nc
NAME				NAME			
STREET ADDRESS			4.3 \$	TREET ADDRE	ess		
CITY-ST-ZIP		- December		CITY-ST-ZIP		[] O [] Addition	_
TITLE		☐ DELETE	5.1 Ti		İ	Change Addition)h
NAME			5.2 N				
STREET ADDRESS				TREET ADDRE	ess		
CITY-ST-ZIP		Document		HTY-ST-ZIP		Change Ladditi	_
TITLE		☐ DELETE	6.1 TI			L Change Addition)[1
NAME [Ì		6.2 N		1		
STREET ADDRESS			6.3 S	TREET ADDRE	ESS		

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 recoiver 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: