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

DOCUMENT # 709774

(4)

PALM BAY CONDOMINIUM, INC.

FILED Apr 29 1998 8:00am Secretary of State

Principal Place of Business		Mailing Address 770 PALM BAY LANE MIAMI FL 33138 US			1 100111 10011 00118 10111 10011 10111	HOUS BLOCK ON	ALL DEUTE S	11001 010 11 (001	
770 PALM BAY LANE MAAM FL 33138 US						3. Date Incorporated or Qualified 10/18/1965 4. FEI Number Applied For			
5 Dianiant	N	T #				59-1112308			lot Applicable
2. Principal Place of Business 21		2a. Mailing Address 28	26			6. Certificate of Status Desired) \$		Additional Required
Suite, Apt. #, etc.		Suite, Apt. #, etc.				6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
City & State		City & State				7. Is this nonprofit corporation a homeowners association?			
Zip	Country		Count			8. This corporation owes or has paid the current year Intangible			
24 25 9. Name and Address of Cur		29 30				Personal Property Tax due June 30.			No No
	V. Name and Address of Curren	ir veðistelen viðelir		81	Name	10. Name and Address of New Regist	ered Age	nt	
ROBERT	S MANAGEMENT & REALTY CO	., INC.	L	82		ddress (P.O. Box Number is Not Acceptable)			<u>-</u>
1840 NE 153RD STREET NORTH MIAMI BEACH FL 33162				83					
				B4	City		E1 8	5 Zip	Code
11. Pursuant	to the provisions of Sections 617.050	2 and 617 1508 Florida Statut	tac the eh		- named o	corporation submits this statement for the sure	FL		ito vociotorod
office or r agent. I a	registered agent, or both, in the State im familiar with, and accept the oblig	of Florida. Such change was ations of, Section 617.0503, Fl	authorized orida Statu	by	the corpo	corporation submits this statement for the purp pration's board of directors. I hereby accept th	e appoint	ment as	s registered
SIGNATURE									
12.	Stgnature, typed or printed name of registered agent and tritle if applicable (NOTE R OFFICERS AND DIRECTORS			egistered Agent signatura require 13.		equired when reinstating) E ADDITIONS/CHANGES TO OFFICER:	ATE	SECTO	DC IN 12
TITLE	PD	DELETE	1.1 7176	Æ		TIDOTTION GOT TO GET TO GET TO CET		Change	Addition
NAME	CRITCHETT, DAN		1.2 NAME		İ		_		
STREET ADDRESS	770 PALM BAY LANE		1.3 STF		ADDRESS				
CITY-ST-ZIP	MIAMI FL		1.4 City-		- ZIP				
TITLE	VO	OELETE 2:1		2.1 TITLE		D		Change	Addition
NAME	DEWITZ, CURTIS			2.2 NAME		GEORGE POULOS	<u>_</u>		•
STREET ADDRESS							i		
CITY-ST-ZIP TITLE	MAMIFL VD	DELETE	2.4 CIT		T-ZIP	miami, h	···	<u> </u>	T same.
NAME	GALLAGHER, PHIL			3.1 TITLE 3.2 NAME			ш	Change	□ Addition
STREET ADDRESS	770 PALM BAY LANE				ADDRESS				
CITY-ST-ZIP	MIAMI FL	nam el		3.4. CITY-ST-ZIP					
TITLE	SD	DELETE	4.1 TITL					Change	Addition
NAME	MOSHOLDER, CORINA		4. 2 NAJ	ИE				-	_
STREET ADDRESS	770 PALM BAY LANE		4.3 STR	EET A	ADDRESS				
CITY-ST-ZIP	MIAMI FL			4.4 CITY - ST - ZIP					
TITLE	TD	DELETE	5.1 TITL	E				Change	Addition
NAME	ATLAS, RUSSELL		5.2 NAM	IE					
STREET ADDRESS	770 PALM BAY LANE		5.3 STR	EET A	ADDRESS				
CITY-ST-ZIP	MIAMI FL		5.4 CITY		- ZIP				
TITLE		☐ DELETE	6.1 TITL	E				Change	Addition

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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changes.

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

806-947-8555