## **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 # 714194

(8)

## NORTH HAMPTON COURT ASSOCIATION, INC.

Principal Place of Business Mailing Address									
1965 S.E. 5TH COURT 1965 S.E. 5TH CT.									3. Date Incorporated or Qualified
POMPANO BEA	CH FL 33060			1750 N.E. 48TH CT.					03/04/1968
US POMPANO BEACH FL 330						)			4. FEI Number Applied For
				US					59-1287502 Not Applicable
Principal Place of Business     1				2a. Mailing Address					5. Certificate of Status Desired
Suite, Apt. #, etc.				Suite, Apt. #, etc.					6. Election Campaign Financing \$5.00 May Be
22				27					Trust Fund Contribution
City & State				City & State					7. Is this nonprofit corporation a homeowners association?
Zip Country				Zip Country					
24	<b>⊢</b> '		100	29 30			Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
24)	9- Name and Address of Curren						—		10. Name and Address of New Registered Agent
3. Name and Addition of Outreat Registered Agent						81	N	lame	To Table the Address of the Tregisteres Agent
MCCORMICK, CARMEL						82 Street Address (P			ss (P.O. Box Number is Not Acceptable)
1971 S.E. 5TH COURT, APT. 203-E								u cot Addi co	33 (1.0. Box Number 13 Not Modephable)
POMPANO BEACH FL 33060						83	1		
						84	C	ity	FL 85 Zip Code
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 registere									
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 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 617.0503, Florida Statutes.									
SIGNATURE									
Signature, typed or printed name of registered agent and title if applicable. (NOTE: I  12. OFFICERS AND DIRECTORS						egistered Agent signature requirer		gnature required	when reinstating)  ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	OFFICERS AND	DINE	DELETE		TITLE			Change Addition
NAME	"	ם חבוודב							_ Grange
	100 0 00 10001 1100			1.2 NAME				DEEC	
STREET ADDRESS	DOMESTIC DESCRIPTION						1.3 STREET ADDRESS		-
CITY-ST-ZIP TITLE	D						1.4 CITY-ST-ZIP 2.1 TITLE		☐ Change ☐ Addition
NAME	GRAFT, GERALD			2.2 N					
STREET ADDRESS	1965 SE 5TH CT.							IDECC	
CITY-ST-ZIP	POMPANO BCH. FL 00000						2.3 STREET ADDRESS 2. 4 CITY-ST-ZIP		÷*
TITLE	D						3.1 TITLE		Change Addition
NAME	WYHTE, DONALD			3.2 N					
STREET ADDRESS						3.3 STREET ADDRESS			
CITY-ST-ZIP	POMPANO BCH, FL 00000				3.4. CITY-ST-ZIP			į.	
TITLE	DV DELETE				_	4.1 TITLE			Change Addition
NAME	CARUSO, JOSEPH				4, 2 NAME			<del></del>	
STREET ADDRESS	100 000 000 0000					4.3 STREET ADDRESS		2239	
CITY-ST-ZIP	DOMPANO DOM EL CORDO					4.4 CITY-ST-ZIP		1	
TITLE	D DELETE					5.1 TITLE			Change Addition
NAME DANIEL, LAWRENCE					5.2 NAME			_ · -	
STREET ADDRESS 1965 S.E. 5TH CT.						5.3 STREET ADDRESS		RESS	
CITY-ST-ZIP POMPANO BCH. FL						5.4 CITY-ST-ZIP			
TITLE DELETE					_	8.1 TITLE		<u>' .                                    </u>	☐ Change ☐ Addition
NAME				_		NAME			_ · _
STREET ADDRESS	ĺ					STREET	T ADD	DECC	
DITILLE AUUNESS	i				0.5		י המטו		

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 changed or on an attachment with an address.

**SIGNATURE:** 

. .. ..

27/98

954-941-9124

**FILED** 

Feb 04 1998 8:00am

Secretary of State

3H2E037 (10/97)