

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **715077** (4)
1. Corporation Name
CRYSTAL COURT MANOR NO. 10 CONDOMINIUM, INC.



Principal Place of Business Mailing Address
1454 N. 12TH COURT HOLLYWOOD FL 33019 **1454 N. 12TH COURT HOLLYWOOD FL 33019**

3. Date Incorporated or Qualified **08/08/1968** 3a. Date of Last Report **04/12/1995**

2. Principal Place of Business	2a. Mailing Address	4. FEI Number	Applied For
21	26	59-1321325	Not Applicable
Suite, Apt. #, etc.	Suite, Apt. #, etc.	5. Certificate of Status Desired	\$8.75 Additional Fee Required
22	27	<input type="checkbox"/>	
City & State	City & State	6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
23	28	<input type="checkbox"/>	
Zip	Country	Zip	Country
24	25	29	30
9. Name and Address of Current Registered Agent		10. Name and Address of New Registered Agent	

PELLARIN, DENNIS
1454 N 12 CT 7B
HOLLYWOOD FL 33019

81 Name **CATHERINE LANE**
82 Street Address (P.O. Box Number is Not Acceptable) **1454 N. 12th Ct. 7B**
83
84 City **Hollywood** FL 85 Zip Code **33019**

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 *Catherine Lane* DATE **4/9/96**
Signature typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when re-registering)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP <input checked="" type="checkbox"/> DELETE	1.1 TITLE	DP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	PELLARIN, DENNIS	1.2 NAME	CATHERINE LANE
STREET ADDRESS	1454 N 12 CT	1.3 STREET ADDRESS	1454 N. 12th Ct.
CITY-ST-ZIP	HOLLYWOOD FL	1.4 CITY-ST-ZIP	Hollywood, FL 33019
TITLE	DT <input checked="" type="checkbox"/> DELETE	2.1 TITLE	DT-DS <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HUBNER, FRED	2.2 NAME	LINDA WELSCH
STREET ADDRESS	1454 N 12 CT	2.3 STREET ADDRESS	1454 N. 12th Ct.
CITY-ST-ZIP	HOLLYWOOD FL	2.4 CITY-ST-ZIP	Hollywood, FL 33019
TITLE	DS <input checked="" type="checkbox"/> DELETE	3.1 TITLE	DVP <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	HUBNER, ANN	3.2 NAME	GHISLAINE J. Namers
STREET ADDRESS	1454 N 12 CT	3.3 STREET ADDRESS	1454 N. 12th Ct.
CITY-ST-ZIP	HOLLYWOOD FL	3.4 CITY-ST-ZIP	Hollywood, FL 33019
TITLE	DVP <input checked="" type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SCHUMACKER, RON	4.2 NAME	
STREET ADDRESS	1454 N 12 CT	4.3 STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD FL	4.4 CITY-ST-ZIP	
TITLE	D <input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	ZBOYAN, LILLIAN	5.2 NAME	
STREET ADDRESS	1454 N 12 CT	5.3 STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD FL	5.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *Catherine Lane* DATE **4/9/96**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (12/95)