## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION **ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS** 

1**9**98

**DOCUMENT #**Corporation Name

(0)

## CONDOMINIUM ASSOCIATION OF VALIANT HOUSE, INC.

Principal Place of Business Mailing Address **801 SOUTH OCEAN DRIVE** 801 SOUTH OCEAN DRIVE 3. Date Incorporated or Qualified HOLLYWOOD FL 33019 HOLLYWOOD FL 33019 01/29/1970 4. FEI Number Applied For Not Applicable <u>59-1370419</u> 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 5. Certificate of Status Desired 26 Fee Required Suite, Apt. #, etc. Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be 22 27 Trust Fund Contribution Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? 23 🕽 Yes **¥** No 28 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 30 29 9. Name and Address of Current Registered Agent

LEPKOWITZ, DENNIS S 2285 CORPORATE BLVD., NW **SUITE 120** -BOOA-RATON PL 33431

	Personal Property Tax due June 30. X Yes No
	10. Name and Address of New Registered Agent
81	Name KAYE & ROGER P.A.
82	Street Address (P.O. Box Number is Not Acceptable)  6 26 1 NORTHWEST 6 WAY
83	Suite 103
84	City 85 Zip Code

**FILED** 

May 22 1998 8:00am

Secretary of State

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 5.6.4.3 ENTRY NOTICE THE PART CANDED							
SIGNATURE	Signature should be pointed name of pagistarca agent and time if apple		Registered Agent signature	Frequired when reinstation 12.6708-261645-2617-15			
12.	OFFICERS AND DIRECTOR		13.	ADDIMENTAL AND DIRECTOR	RS IN 12		
TITLE	AD-D	DELETE	1.1 TITLE		Addition (		
NAME	<b>BLUMBERG, ISADORE</b>		1.2 NAME	LINDA MACKENZIE 801 6 OCEAN DR TIDY			
STREET ADDRESS	801 S OCEAN DRIVE		1.3 STREET ADDRESS				
CITY-ST-ZIP	HOLLYWOOD FL		1.4 CITY-ST-ZIP	HOllywood F( 33019			
TITLE	VPD	DELETE	2.1 TITLE	ST Change	Addition		
NAME	HILTON, HERBERT	•	2.2 NAME	AMY SMITH DR 702	,		
STREET ADDRESS	801 S OCEAN DR		2.3 STREET ADDRESS	BOLL & OCEAN DE			
CITY-ST-ZIP	HOLLYWOOD FL		2. 4 CITY-ST-ZIP	1+0114WOOD PC 33019			
TITLE	400 P	DELETE	3.1 TITLE	Change	Addition		
NAME	MCGOWAN, WILLIAM		3.2 NAME	LEUNARD FRISOLI			
STREET ADDRESS	801 S OCEAN DR		3.3 STREET ADDRESS	801 SOCEAN DR. 1006			
CITY-ST-ZIP	HOLLYWOOD FL		3.4. CITY-ST-ZIP	HOLLYWOOD FL 33019			
TITLE	S	DELETE	4.1 TITLE	Change	Addition		
NAME	CONITO, CHERYL		4. 2 NAME	LESHE SZAKALL 112			
STREET ADDRESS	801 SOUTH OCEAN DRIVE		4.3 STREET ADDRESS	801 S OCEAN DE			
CITY-ST-ZIP	HOLLYWOOD FL		4.4 CITY - ST - ZIP	Hollywood FC 33019			
TITLE	D	DELETE	5.1 TITLE	Change	Addition		
NAME	J <b>E</b> NKINS, WILLIAM		5.2 NAME	FRANK POMPHAND 403	}		
STREET ADDRESS	801 SOUTH OCEAN DRIVE		5.3 STREET ADDRESS		1		
CITY-ST-ZIP	HOLLYWOOD FL 33019		5.4 CITY-ST-ZIP	Hollywood F( 33019			
TITLE	T	DELETE	6.1 TITLE	Change	Addition		
NAME	MCKEEVER, DEBBI		6.2 NAME	FRUIN JONKINS 207	0/9		
STREET ADDRESS	801 S OCEAN DRIVE		6.3 STREET ADDRESS	801 SOCEAN DR 207	1 4/1		

Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplied enter an an 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 of trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 13 if changed, or on an attachment with an address. CITY-ST-ZIP