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 #

(8)

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CORONET HAVEN CONDOMINIUM, INC.							I ON BIOLOGIA	PAT 414 I Y 914 IA BIT 11	HI 311 11 (35 1
Principal Place of Business Mailing Address						-	FO PHAY OND A OF	Alf Bidil Gibit Ol	OH OIDH ITOL
		2236 JACKSON ST			3. Date Incorporated or Qualified	t i			
HOLLYWOOD FL 33020		# 6				03/18/1971			
US		HOLLYWOOD FL 33020 US				4. FEI Number Applied For			
		05				59-1416051			t Applicable
2. Principal P	lace of Business	2a. Mailing Address	2a. Mailing Address			<u> </u>			Additional
21		26			5. Certificate of Status Desired		Fee Re		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			6. Election Campaign Financing		\$5.00		
22		27			Trust Fund Contribution		Added to		
City & State	0	City & State			7. Is this nonprofit corporation a	horpeowne	rs associatio	n?	
23		28				☑ Yes □ No			
Zip	Country Zip		Country			8. This corporation owes or has			
24	[25]	29 3	<u> </u>			Personal Property Tax due Ju			 No _
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent Name				
			Į,	81 Na	ame				ļ
MENEGAZZO, DORIS				82 Street Address (P.O. Box Number is Not Acceptable)					
2238 JACKSON STREET				83					
SUITE 6				83					
HOLLYWOOD FL 33020				84 City FL 85 Zip Code					
11. Pursuant	to the provisions of Sections 617,0502	and 617,1508, Florida Statutes	the ab	ove-na	med corpo	ration submits this statement for the			s registered
office or r agent. I a	to the provisions of Sections 617,0502 egistered agent, or both, in the State om familiar with, and accept the obligat	of Florida. Such change was au tions of, Section 617.0503, Flori	thorized da Statu	l by the Jies.	corporatio	on's board of directors. I hereby acc	ept the ap	pointment as	registered
SIGNATURE						•			<u> </u>
Signature, typed or printed name of registered agent and title if applicable. (NOTE: 12. OFFICERS AND DIRECTORS			Registered Agent signature required			d when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	D DELETE		1.1 100	ı F	1000	ESIDENT	IOE IIO AIT	Change	Addition
NAME	PITASSI, MARY		1.2 NAME			ASSI, MARY		CE	
STREET ADDRESS	2236 JACKSON ST., #1		***	REET ADDR	xee 2 2	36 JACKSON ST #	1		i
CITY-ST-ZIP	HOLLYWOOD FL						တစ		J
TITLE	D	: JELETE		2.1 TITLE		-50 NOOD, 35		Change	Addition
NAME	CUMMINS, AIDAN	•	2.2 NAJ		ı				
STREET ADDRESS			2.3 STF	2.3 STREET ADDRESS			91 g •		1
CITY-ST-ZIP	HOLLYWOOD FL			2.4 CITY-ST-ZIP					
TITLE	VP	☐ DELETÉ	3.1 1111					Change	Addition
NAME	AUCLAIR, CHRISTINE		3.2 NA	ME]
STREET ADDRESS	2236 JACKSON ST., #4		3.3 STR	EET ADDR	ess				1
CITY-ST-ZIP	HOLLYWOOD FL		3.4. C/T	TY-ST-ZIF	,)				Ì
TIFLE	D	☐ DELETE	4.1 TIT					Change	Addition
HAME	BERTHOLD, HEINZ		4. 2 NA	ME)				ì
STREET ADDRESS	2236 JACKSON STREET #3			4.3 STREET ADDRESS					}
CITY-ST-ZIP	1101111000		4.4 CIT	4.4 CITY-ST-ZIP					
TITLE			_			C. ITREASURER		Change	Addition
NAME			5.2 NAM	ME	DO	RIS MENEGAZZO			j
STREET ADDRESS			5.3 STR	EET ADOR	ESS 22	36 JACKSON ST +	- 6		ì

5.4 CITY-ST-ZIP

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

6.1 TITLE 6.2 NAME

SIGNATURE:

CITY-ST-ZIP

STREET ADDRESS

TITLE

DELETE

14. I hereby certify that the information supplied with this fijing 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 supplied enter 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

FILED

Apr 14 1998 8:00am

Secretary of State