

# FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION  
ANNUAL REPORT  
**1996**



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

**DOCUMENT # 722248 (2)**

1. Corporation Name  
**CERAMIC LEAGUE OF THE PALM BEACHES, INC.**



Principal Place of Business  
**1210 GATEWAY RD #6  
LAKE PARK FL 33403  
US**

Mailing Address  
**1210 GATEWAY RD  
#6  
LAKE PARK FL 33403  
US**

3. Date Incorporated or Qualified  
**12/10/1971**

3a. Date of Last Report  
**03/06/1995**

4. FEI Number  
**23-7200978**

5. Certificate of Status Desired  **\$8.75 Additional Fee Required**

6. Election Campaign Financing Trust Fund Contribution  **\$5.00 May Be Added to Fees**

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes  Yes  No

2. Principal Place of Business

21. Suite, Apt. #, etc.

22. City & State

23. Zip

24. Country

25. Country

26. Mailing Address

27. Suite, Apt. #, etc.

28. City & State

29. Zip

30. Country

9. Name and Address of Current Registered Agent

~~DITTMER ROBERT~~  
~~1210 GATEWAY RD~~  
~~#6~~  
~~LAKE PARK FL 33403~~

10. Name and Address of New Registered Agent

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

85. Zip Code

**FL**

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> DELETE
AT	TURECKI, ALICE	733 WATERWAY DR	N PALM BCH, FL 00000	<input type="checkbox"/>
TD	<del>DITTMER, ROBERT</del>	<del>816 SECOND CT</del>	<del>LAKE PARK FL</del>	<input checked="" type="checkbox"/>
SD	EATON, MARGERY	1408 INDIAN RD.	W. PALM BEACH FL	<input type="checkbox"/>
ASD	BARTON, LOIS	16486 95TH AVE N	JUPITER FL	<input type="checkbox"/>
PD	GUNDLACH, ANNA	8749 CITATION DR	PALM BCH GARDENS FL	<input type="checkbox"/>
VPD	<del>LEPORE, DOREEN</del>	<del>428 SEABREEZE AVE.</del>	<del>PALM BEACH FL</del>	<input checked="" type="checkbox"/>

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	NAME	STREET ADDRESS	CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
TREASURER	Smith, Marjorie	126 Seville Rd.	West Palm Beach, FL 33405	<input checked="" type="checkbox"/>
Vice President	Kuhl, Deloris	165 Seashore Drive	Jupiter, FL 33477	<input checked="" type="checkbox"/>

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: *Alice Turecki, Asst. Treas.* **APR. 26. 1996** (407) 844-2698

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
**ALICE TURECKI**

Date \_\_\_\_\_ Daytime Phone # \_\_\_\_\_

CR2E037 (12/95)