

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 # 723400 (8)

1. Corporation Name

FRENCH QUARTER CONDOMINIUM PHASE 111, INC.



Principal Place of Business

Mailing Address

PHASE III INC
406 N.W. 70TH AVENUE
PLANTATION FL 33317

PHASE III INC
406 N.W. 70TH AVENUE
PLANTATION FL 33317

3. Date Incorporated or Qualified
05/15/1972

3a. Date of Last Report
04/26/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

30

4. FEI Number
59-1464056

Applied For
Not Applicable

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PAPPAS, JOHN
290 NW 69TH AVE, #169
PLANTATION, FL
33317

81 Name

ROSE MARY HUFECUT

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

83

312 NW 69th Ave. #252

84 City

Plantation, FL 33317

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 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

Rose Mary Hufecut

(NOTE: Registered Agent signature required when reinstalling)

DATE

4-16-96

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☐ DELETE
NAME CARMAVALE, DOMONIC
STREET ADDRESS 324 NW 69TH AVE. 146
CITY-ST-ZIP PLANTATION FL

1.1 TITLE D ROSE MARY HUFECUT ☐ Change ☐ Addition
1.2 NAME 312 NW 69th Ave. #252
1.3 STREET ADDRESS Plantation, FL 33317
1.4 CITY-ST-ZIP

TITLE VD ☐ DELETE
NAME COLOSIMO, DOMINIC
STREET ADDRESS 320 NW 69TH AVE., #249
CITY-ST-ZIP PLANTATION, FL 00000

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE PD ☐ DELETE
NAME PAPPAS, JOHN
STREET ADDRESS 290 NW 69 AVE #169
CITY-ST-ZIP PLANTATION, FL 00000

3.1 TITLE PD ALAN BECKMAN ☐ Change ☐ Addition
3.2 NAME 326 NW 69th Ave. #143
3.3 STREET ADDRESS Plantation, FL 33317
3.4 CITY-ST-ZIP

TITLE SD ☐ DELETE
NAME HUFECUT, ROSEMARY
STREET ADDRESS 312 NW 69 AVE 252
CITY-ST-ZIP PLANTATION, FL 00000

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE TD ☐ DELETE
NAME MOESTA, BETTY
STREET ADDRESS 312 NW 69TH AVENUE #152
CITY-ST-ZIP PLANTATION FL

5.1 TITLE TD DOMINICK R. CARNOVALE ☐ Change ☐ Addition
5.2 NAME 324 NW 69th Ave. #146
5.3 STREET ADDRESS Plantation, FL 33317
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

DATE

Daytime Phone #

4-16-96 954-792-2268

CR2E037 (12/95)