

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

DOCUMENT # 723805 (8)

1. Corporation Name

TOWN HOUSE VILLAS CONDOMINIUM, INC. THE

Principal Place of Business

1417 N 15TH AVE.
HOLLYWOOD FL 33020
US

Mailing Address

1417 N 15TH AVE
HOLLYWOOD FL 33020
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified
07/05/1972

3a. Date of Last Report
06/14/1994

4. FEI Number
59-1450528

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

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status ☐

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 100.022,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

21

Suite, Apt. #, etc.

1419 N 15 AVE.

City & State

HOLLYWOOD FL

Zip

33020

Country

USA

2a. Mailing Address

26

Suite, Apt. #, etc.

1419 N 15 AVE.

City & State

HOLLYWOOD FL

Zip

33020

Country

USA

9. Name and Address of Current Registered Agent

LEWIS, FLORENCE
1341 N 15TH AVE
HOLLYWOOD FL 33020

10. Name and Address of New Registered Agent

81 Name

GARY GROSELLE

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

1427 N 15 AVE.

83

84 City

HOLLYWOOD

FL

85 Zip Code

33020

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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. Each 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 607.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when re-registering)

01 May 95

12. OFFICERS AND DIRECTORS

TITLE

D

NAME

MARVIN, THELMA

STREET ADDRESS

1321 N 15 AVENUE

CITY - ST - ZIP

HOLLYWOOD FL

TITLE

STD

NAME

ROWE, BERNICE W

STREET ADDRESS

1417 N 15TH AVE

CITY - ST - ZIP

HOLLYWOOD, FL 00000

TITLE

PD

NAME

FLORENCE LEWIS

STREET ADDRESS

1341 N. 15TH AVENUE

CITY - ST - ZIP

HOLLYWOOD FL

TITLE

VD

NAME

DONNA CAFFO

STREET ADDRESS

1401 N. 15TH AVENUE

CITY - ST - ZIP

HOLLYWOOD FL

TITLE

D

NAME

DRAPER, PATRICIA

STREET ADDRESS

1329 N 15 AVENUE

CITY - ST - ZIP

HOLLYWOOD FL

TITLE

D

NAME

JACOBSEN, NORMA

STREET ADDRESS

1325 N 15 AVENUE

CITY - ST - ZIP

HOLLYWOOD FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE

SD GORTLER, ELINOR

1.2 NAME

1419 N 15 AVE

1.3 STREET ADDRESS

HOLLYWOOD, FL 33020

1.4 CITY - ST - ZIP

2.1 TITLE

TD

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY - ST - ZIP

3.1 TITLE

VD

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY - ST - ZIP

4.1 TITLE

PD

4.2 NAME

GROSELLE, GARY

4.3 STREET ADDRESS

1427 N 15 AVE.

4.4 CITY - ST - ZIP

HOLLYWOOD, FL 33020

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY - ST - ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY - ST - ZIP

PNASTASIA, EDWARD

1327 N 15 AVE.

HOLLYWOOD, FL 33020

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 110.07(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 in an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Title

Signature/Printed Name

05 May 95