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NONPROFIT CORPORATION ANNUAL REPORT 1999

FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
 Secretary of State  
 DIVISION OF CORPORATIONS

DOCUMENT # 724673

1. Corporation Name

SPANISH TRAIL APARTMENTS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

3117 SPANISH TRAIL  
 DELRAY BEACH FL 33483  
 US

Mailing Address

3117 SPANISH TRAIL  
 DELRAY BEACH FL 33483  
 US

3103 SPANISH TRL

3103 SPANISH TRL



2. Principal Place of Business

21 3103 SPANISH TRL

2a. Mailing Address

26 3103 SPANISH TRL

3. Date Incorporated or Qualified

10/30/1972

Suite, Apt. #, etc.

22 DELRAY BCH FL

Suite, Apt. #, etc.

27 DELRAY BCH FL

4. FEI Number

59-1586894

Applied For

Not Applicable

City & State

23 33483 USA

City & State

28 33483 USA

5. Certificate of Status Desired

\$8.75 Additional Fee Required

Zip

Country

Zip

Country

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

SMITH, MICHAEL  
 3135 SPANISH TRAIL  
 DELRAY BCH FL 33483

10. Name and Address of New Registered Agent

81 Name RALPH S. SCRENCI

82 Street Address (P.O. Box Number is Not Acceptable)  
 3109 SPANISH TRL

83 DELRAY BCH FL

84 City DELRAY BCH

FL

85 Zip Code

33483

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

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

(NOTE: Registered Agent signature required when reinstating)

2-28-99

DATE

12. OFFICERS AND DIRECTORS

TITLE PD  DELETE

NAME SMITH, MICHAEL  
 STREET ADDRESS 3135 SPANISH TRAIL  
 CITY-ST-ZIP DELRAY BEACH FL 33483

TITLE SD  DELETE

NAME HALLMAN, PHYLLIS  
 STREET ADDRESS 3103 SPANISH TRAIL  
 CITY-ST-ZIP DELRAY BEACH FL 33483

TITLE VPD  DELETE

NAME SAYRS, DONNA  
 STREET ADDRESS 3117 SPANISH TR  
 CITY-ST-ZIP DELRAY BCH, FL 00000 33483

TITLE TD  DELETE

NAME VONK, SALLYE  
 STREET ADDRESS 3133 SPANISH TRAIL  
 CITY-ST-ZIP DELRAY BEACH FL 33483

TITLE D  DELETE

NAME MORIARITY, DANIEL  
 STREET ADDRESS 3127 SPANISH TRAIL  
 CITY-ST-ZIP DELRAY BEACH FL 33483

TITLE  DELETE

NAME  
 STREET ADDRESS  
 CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  Change  Addition

1.2 NAME SCRENCI, RALPH S.  
 1.3 STREET ADDRESS 3109 SPANISH TRL  
 1.4 CITY-ST-ZIP DELRAY BCH, FL 33483

2.1 TITLE S/D  Change  Addition

2.2 NAME  
 2.3 STREET ADDRESS  
 2.4 CITY-ST-ZIP

3.1 TITLE V/D  Change  Addition

3.2 NAME  
 3.3 STREET ADDRESS  
 3.4 CITY-ST-ZIP

4.1 TITLE T/D  Change  Addition

4.2 NAME  
 4.3 STREET ADDRESS  
 4.4 CITY-ST-ZIP

5.1 TITLE D  Change  Addition

5.2 NAME  
 5.3 STREET ADDRESS  
 5.4 CITY-ST-ZIP

6.1 TITLE  Change  Addition

6.2 NAME  
 6.3 STREET ADDRESS  
 6.4 CITY-ST-ZIP

14. I hereby certify that the information supplied with this filing 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 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, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED

2/28/99

(561) 266-9525

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)