

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 # 726325 (4)

1. Corporation Name

N & M TOWNHOUSE CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

Mailing Address

7528 SW 58 AVE.
S. MIAMI FL 33143

7528 SW 58 AVE.
S. MIAMI FL 33143

3. Date Incorporated or Qualified
05/04/1973

3a. Date of Last Report
03/31/1995

2. Principal Place of Business

2a. Mailing Address

21 7518 S.W. 58 AVE

26 7518 SW 58 Avenue

4. FEI Number
59-1501342

Applied For
Not Applicable

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

City & State

23 MIAMI, FL 33142

City & State

28 MIAMI, FL 33143

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

24 Zip 33143

Country

25 Dade

Zip

29 33143

Country

30 Dade

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

SHEPPARD, LINDA
7528 SW 58 AVE
SOUTH MIAMI FL 33143

81 Name Shepard, Linda
82 Street Address (P.O. Box Number is Not Acceptable)
6270 S.W. 84th Street
83
84 City MIAMI, FL FL 85 Zip Code 33143

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)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☐ DELETE
NAME TD SHEPPARD, LINDA
STREET ADDRESS 7528 SW 58 AVE
CITY-ST-ZIP MIAMI FL 33143

11 TITLE ☒ Change ☐ Addition
12 NAME TD Shepard, Linda
13 STREET ADDRESS 6270 S.W. 84th Street
14 CITY-ST-ZIP MIAMI, FL 33143

TITLE ☐ DELETE
NAME PD PATTERSON, JOHN H
STREET ADDRESS 7610 SW 58 AVE
CITY-ST-ZIP MIAMI FL 33143

21 TITLE ☒ Change ☒ Addition
22 NAME PD Patterson, John H.
23 STREET ADDRESS 44 West Flagler St., Suite 2450
24 CITY-ST-ZIP MIAMI, FL 33130

TITLE ☐ DELETE
NAME SD SHORE, SANDRA
STREET ADDRESS 7506 SW 58 AVE
CITY-ST-ZIP MIAMI FL 33143

31 TITLE ☐ Change ☒ Addition
32 NAME SD Shore, Sandra
33 STREET ADDRESS 7506 S.W. 58 Ave.
34 CITY-ST-ZIP MIAMI, FL 33143

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

41 TITLE ☐ Change ☐ Addition
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

51 TITLE ☐ Change ☐ Addition
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP

TITLE ☐ DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

61 TITLE ☐ Change ☐ Addition
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

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***\$61.25

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:

Linda Shepard

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

5/13/96 305-661-5550

Date

Daytime Phone

CR2E037 (12/95)