## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

726607

(5)

## FRENCH QUARTER CONDOMINIUM PHASE V, INC.

Principal Place of Business Mailing Address

**FILED** 

May 09 1997 8:00am

Secretary of State

408 N.W. 70TH AVE.   PLANTATION FL 33317-7550				408 N.W. 70TH AVE. PLANTATION FL 33317-7550									
									3. Date Incorporated or Qualified 06/05/1973	3a. Date of Last Report 04/29/1996			
2. Principal Place of Business				2a. Mailing Address					4. FEI Number			Applied For	
21			26						59-1464055			Not Applicable	
Sulte, Apt. #, etc.				Suite, Apt. #, etc.					5. Certificate of Status Desired		\$8.7	5 Additional	
22			27						5. Certificate of Status Desired	ш	Fee	Required	
City & State				City & State				- "	6. Election Campaign Financing \$5.00 May Be				
23			28						Trust Fund Contribution			d to Fees	
Zip	Country			Zip Oou					8. This corporation has liability for i			r s. 199.032,	
24 25			29	1				Florida Statutes Yes No					
9. Name and Address of Current Registered Agent								10. Name and Address of New Registered Agent					
						81	Name						
BILL COKER						82	Street	Addres	s (P.O. Box Number is Not Acceptab い、い・697日 AVE)				
334 N.W. 69TH A;VE., #196							33	4	N.W. GATH AVE,	71 d	96		
PLANTATION FL 33317													
						84	City				85 Zi	p Code	
		(5 )				Ш				<u>FL</u>	1 1	`	
office or re	to the provisions eaistered agent.	or Sections 617.050 or both, in the State	02 and 61 of Florid	7.1508, Florida Statu a. Such change was	tes, the al	g pved	-named The con	l corpor	ation submits this statement for the p	urpose of	changing	g its registered	
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 signate  12. OFFICERS AND DIRECTORS  13.										DATE	SIEFA		
TITLE	TD OFFICERS AND			DIRECTORS 13.				~	ADDITIONS/CHANGES TO OFFIC		Chann		
NAME	ROBERT HUBER			12 NA				D	GERT HUBER		<b>M</b> Chang	e 1_1 Addition	
STREET ADDRESS							ADDRESS	ROBERT HUBER  8 334 NW 69TH AUE \$295					
CITY-ST-ZIP	B) 440-40-40-40-							127	ANTATION, FL 333	17			
TITLE	VPD						1 - ZIP	Change			e Addition		
NAME	BURNS, DAVID			22 N				Change ( Noth)					
STREET ADDRESS							ADDRESS						
CITY-ST-ZIP				2.40									
TITLE	PD			DELETE 3.1 T				PD			Chang	e Addition	
NAME	COKER, WILLIAM						3.2 NAME		KER, WILLIAM I NW 69 TH AUE, # 2		orang	- L_J Addition	
STREET ADDRESS							ADDRESS	2 2.	NW 69 TH AUE, # 2	96			
CITY-SI-ZIP PLANTATION FL			•	3.4. C				8.7	ANTATION, FL 333	117			
TITLE	D			DELETE	4.1 Tr						Chang	e Addition	
NAME	JOSEPH BL	ICALOS		mount / -	4. 2 N			1.5	EDU BUCALOS	. 00	ysy onong S	C L_I MODITION	
STREET ADDRESS							ADDRESS	1903	JOSEPH BUCALOS 332 NW 69 TH NUE, # 293				
CITY-ST-ZIP	DI 4419 1910 1 01			4.4 CI				100	PLANTATION, FL 38317				
TITLE	SD	····		DELETE	5.1 T(		. 411	1, 5,			Chano	e 🔲 Addition	
NAME	FRED NACH	HMAN		<del></del>	5.2 N/			1		'	,	· E	
STREET ADDRESS 330 NW 69TH AVENUE, #192			2				ADDRESS						
CITY-ST-ZIP PLANTATION FL			-	5.4 CITY									
TITLE	1041111110	77 1 14		DELETE	6.1 TI		1- LIF	<del>                                     </del>			Change	e Addition	
NAME					6.2 N/							C [] MOUITON	
CTDEEX ADDRESS					0.2 10	WIL			•			j	

14. I do 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 attended with an address.