

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 # 726819 (6)

1. Corporation Name

GARDENS BY THE SEA SOUTH CONDOMINIUM ASSOCIATION
, INC.

Principal Place of Business

1541 S OCEAN BLVD
POMPANO BEACH FL 33062-7409

Mailing Address

1541 S OCEAN BLVD
POMPANO BEACH FL 33062-7409



400001869094
-06/20/96--01026--030

3. Date of Last Report or Qualified
06/27/1973

3a. Date of Last Report
05/01/1995

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

25

29

30

4. FEI Number
59-1590961

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

FAULKNER, RICHARD
1541 S OCEAN BLVD
APT 215
POMPANO BEACH FL 33062

81 Name

Steven Borcsok

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

1541 So. Ocean Blvd.

83

Pompano Bch., Fl. 33062

84 City

Pompano Bch.

FL

85 Zip Code

33062

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)

Steven Borcsok

May 10, 1996

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE S
NAME CONWAY, KATHLEEN
STREET ADDRESS 1541 S OCEAN BLVD
CITY-ST-ZIP POMPANO BCH, FL 00000

☒ DELETE

1.1 TITLE P.D
1.2 NAME Steven Borcsok
1.3 STREET ADDRESS 1541 So. Ocean Blvd.
1.4 CITY-ST-ZIP Pompano Bch., Fl. 33062

☒ Change ☐ Addition

TITLE T
NAME DALLAIRE, GILLES
STREET ADDRESS 8 E LECLERC BLVD
CITY-ST-ZIP GRANBY QU

☒ DELETE

2.1 TITLE VP D
2.2 NAME Peter DeVito
2.3 STREET ADDRESS 9 Orange Ave.
2.4 CITY-ST-ZIP Spring Lake, N.J. 07762

☒ Change ☐ Addition

TITLE D
NAME CAMPEAU, YVES
STREET ADDRESS 4437 NEO PIERREFONDS
CITY-ST-ZIP QUE CA

☒ DELETE

3.1 TITLE Sec
3.2 NAME D
3.3 STREET ADDRESS 217 56th St.
3.4 CITY-ST-ZIP Downers Grove, IL 60516-1534

☒ Change ☐ Addition

TITLE P
NAME FAULKNER, RICHARD
STREET ADDRESS 1541 S OCEAN BLVD
CITY-ST-ZIP POMPANO BCH, FL 00000

☒ DELETE

4.1 TITLE Treas
4.2 NAME Josephine Murray
4.3 STREET ADDRESS 1541 So. Ocean Blvd.
4.4 CITY-ST-ZIP Pompano Bch., Fl. 33062

☒ Change ☐ Addition

TITLE VP
NAME JUERGENS, ROBERT
STREET ADDRESS 1541 SOUTH OCEAN BLVD
CITY-ST-ZIP POMPANO BEACH FL

☒ DELETE

5.1 TITLE
5.2 NAME Mary Kozicki
5.3 STREET ADDRESS 237 Skinner Rd.
5.4 CITY-ST-ZIP Vernon, Ct. 06066

☒ Change ☐ Addition

TITLE D
NAME CORBEIL THERESE
STREET ADDRESS 3250 FOREST HILL APT #402
CITY-ST-ZIP MONTREAL CA

☒ DELETE

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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

Peter DeVito

4/19/96

Date

85-4592

Daytime Phone #

CR2E037 (12/95)