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NONPROFIT CORPORATION **ANNUAL REPORT**

1998

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

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Principal Place of Business 6 GARDEN DR BOYNTON BEACH FL 33436-5502 US 2. Principal Place of Business 3. Date Incorporated or Qualify 0. Psi 1583896 5. Certificate of Status Desired 6. Election Campaign Financia Trust Fund Contribution 1. Is this nonprofit corporation over or have Fund Contribution 2. Principal Place of Business 3. Date Incorporated or Qualify 0. Psi 1583896 5. Certificate of Status Desired 6. Election Campaign Financia Trust Fund Contribution 1. Is this nonprofit corporation over or have Fund Fund Fund Fund Fund Fund Fund Fund	a homeown Yes s paid the clune 30.	\$8.75 Fee R \$5.00 Added ters association No urrent year In Yes [d Agent	pplied For lot Applicable Additional lequired May Be to Fees on? atangible No
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CITY-ST-ZIP BOYNTON BEACH FL 33438 1.4 CITY-ST-ZIP			
TITLE SD DELETE 2.1 TITLE		Change	Addition
NAME SCHRAMM, JOAN 22 NAME			
STREET ADDRESS 10 GARDEN DR 2.3 STREET ADDRESS 2.3 STREET ADDRESS			
CITY-ST-ZIP BOYNTON BEACH FL 33436 2.4 CITY-ST-ZIP TITLE PD DELETE 3.1 TITLE		Change	Addition
NAME THORPE, STEPHEN F		□ CHAING	Addition
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CITY-ST-ZIP BOYNTON BEACH FL 33436 3.4. CITY-ST-ZIP			
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NAME ORRISON, ROBERT 4.2 NAME		_ •	_
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CITY-ST-ZIP BOYNTON BEACH FL 33436 4.4 CITY-ST-ZIP			
TITLE VPD DELETE 5.1 TITLE		Change	Addition
NAME CLAUS, BERNARD F 5.2 NAME			
STREET ADDRESS 8 GARDEN DR 5.3 STREET ADDRESS			
CITY-ST-ZIP BOYNTON BEACH FL 33438 5.4 CITY-ST-ZIP			
TITLE DELETE 6.1 TITLE			Addition

14. Thereby 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.

SIGNATURE:

MAR 3 | 1998

6.3 STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP