FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

TITLE

NAME

STREET ADDRESS

729147

(9)

REGENCY HIGHLAND CONDOMINIUM ASSOCIATION, INC.

HEGENOT HIGHEARD CONDOMINIUM ASSOCIATION, INC.												
Principal Place of Business				M	Mailing Address					I ABBAH 18910 MENU MENU MENU MENU MENU BURU BURU BURU BURU BURU BURU BERA DERIK BERAK TERA		
3912 S OCEAN BLVD					3912 S OCEAN BLVD				r	3. Date Incorporated or Qualified		
HIGHLAND BCH FL 33487-2330				HI	HIGHLAND BCH FL 33487-2330					03/18/1974		
										4. FEI Number Applied For		
										59-1694171 Not Applicable		
2. Principal Place of Business					Mailing Address					5. Certificate of Status Desired Section Fee Regulred		
Suite, Apt.	#, etc.	26	Suite, Apt. #, etc.					6. Election Campaign Financing \$5.00 May Be				
22		27	<u> </u>					Trust Fund Contribution Added to Fees				
City & Stat	Θ			\vdash	City & State					7. Is this nonprofit corporation a homeowners association?		
Zip		28	Zip Country				+	Yes No				
24	Country 25			29	30			'	1	This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No		
9. Name and Address of Current F					1991				1	10. Name and Address of New Registered Agent		
							81	Name				
TIDWELL	, RONALD	E					82	Street A	SC Address	Ommers Lin M s (P.O. Box Number is Not Acceptable)		
3912 S. OCEAN BLVD					Street AC			Oli Got 7		912 S. Ocean Blvd.		
#112					83					112		
HIGHLAN			84	City		Inc 7in Code						
11. Pursuant to the provisions of Sections 617.0502 and 617.1508. Florida Statutes, the above-named corr									Corporat	thion submits this statement for the purpose of changing 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	7		Lamare)	~~ <i>//</i> //							
dignature, typed or private name of registered agent									tw beniupen			
12. Tite	PD		OFFICERS AND I	DIREC	DELETE	13	TITLE			ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
NAME		:ON	PHYLLIC		X Miller	1	NAME	!	PD	,		
STREET ADDRESS	AARONSON, PHYLLIS 3908 S OCEAN BLVD #M-126								Sc	hrade, Charles		
CITY-ST-ZIP	HIGHLAND BEACH FL					1	1.4 CITY-ST-ZIP		39	08 S Ocean Blvd.#M-567		
TITLE	VPD				DELETE	_	2.1 TITLE			ghland Beach, F1. 33487		
NAME	PERLMUTH, JESS				^	2.2			VP.	ein, Maurice		
STREET ADDRESS						2.3	2.3 STREET ADDRESS 3		39	12 S Ocean Blvd.#905		
CITY-ST-ZIP	HIGHLAN	ID B	CH FL				CITY-S	T-ZIP		abland Doorb Bl		
TITLE	SEC	. D4	TRICIA		DELETE		TITLE	İ	SE			
NAME CERCET ADDRESS	GAVLICK		THICIA AN BLVD #407				NAME	4000000		mon, Patricia		
STREET ADDRESS CITY-ST-ZIP	HIGHLAN							ADDRESS	39	12 S. Ocean Blvd. #708		
TITLE	TD TEXT	ע טו	LAUTTE		DELETE	_	CITY-S	1-21	Hig	ghland Beach, Fl. Change Addition		
NAME	SCHRAG	O. N	ORMA		, · · · · -		NAME					
STREET ADDRESS			N BLVD #1212					ADDRESS				
CITY-ST-ZIP	HIGHLAN	ID BI	EACH FL			4.41	CITY-SI	T- ZIP				
TITLE					☐ DELETE	5.1	TITLE			☐ Change ☐ Addition		
NAME						5.21	NAME					
STREET ADDRESS						5.3 9	STREET	ADDRESS				
CITY-ST-ZIP						5.4 (CITY-S1	r- 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), Fiorida 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.

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

NONATURE. TO SHOULD LIVE DENIED S. L. C. C. TOO. 1/2V

DELETE

CR2E037 (10/97)

Change

■ Addition

FILED

Feb 09 1998 8:00am

Secretary of State