NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 729278

1. Corporation Name

BERKSHIRE "B" CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	
BERKSHIRE B	•
3040	
DEERFIELD BEACH FL 33442	
US	

2. Principal Place of Business

Suite Ant # etc

Mailing Address

2a. Mailing Address

Suite, Apt. #, etc.

BERKSHIRE B 3040

DEERFIELD BEACH FL 33442

US

26

FILED Apr 14, 1999 8:00 am Secretary of State

04-14-1999 90163 001 14,638.75



Applied For

3. Date Incorporated or Qualifed

04/05/1974

4. FEI Number

2000		27	<u> </u>	·		59-1870183	Not	t Applicable		
City & State						5. Certificate of Status Desired	\$8.75 A	dditional		
23	•	28				5. Certificate of Status Desired	Fee Rec	quired		
Zip	Country	Zip		Country		6. Election Campaign Financing	\$5.00			
24	25	29	30			Trust Fund Contribution	Added to	o Fees		
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent					
	•			81	Name					
SCHNEIDER, JACK				82	82 Street Address (P.O. Box Number is Not Acceptable)					
CENTURY VILLAGE										
BERKSHIRE "B" 3040				83						
DEERFIELD BEACH FL 33442			84	84 City 85 Zip Code						
				-	FL	.				
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										
SIGNATORE	Signature, typed or printed name of registered agent a	nd title if applicable	. (NOTE: Reg		t signature rec	equired when reinstating) DATE	D DIDEOTO	DO 101 42		
12.	OFFICERS AND	DIRECTORS		13.		ADDITIONS/CHANGES TO OFFICERS AN	Change	Addition		
TITLE !	PD		☐ DELETE	1,1 TITLE		00.2.4 0.03	☐ Change	₽ ∧udition		
NAME .	BROWN, BARBARA			1,2 NAME		GOLDIE KITTED " A"		•		
STREET ADDRESS	4027 BERKSHIRE B			1.3 STREET		4033 BERKSHIRE B	11.60			
CITY-ST-ZIP	DEERFIELD BEACH FL 33442		/_	1.4 CITY-ST	-ZIP	DEERFIELD BEACH, FL 3	74H G	Addition		
TITLE	D		DELETE	2.1 TTTLE		Parrie 1100	Change	☐ ¥@@IIOII		
NAME	WEISS, LOTTIE			2.2 NAME		MARIAN COOPER				
STREET ADDRESS	BERKSHIRE B		1	2.3 STREET	ADDRESS	1024 BERKSHIRE B	du a			
CITY-ST-ZIP	DEERFIELD BEACH FL 33442			2.4 CITY-S	T-ZIP	DEERFIELD IS EAUT, Th. 33	77 5	Addition		
TITLE	D		LETE	3.1 TITLE		12.4.1 2.41616161	Change	☐ Addition		
NAME	SPITZ, LOUIS		1	3.2 NAME	-	HELEN BONFIGLIO 4028 BERKSHIRE B		ŀ		
STREET ADDRESS	4023 BERKSHIRE B			3.3 STREET	ADDRESS	4028 BERKSHIKE IS	12.41	_		
CITY-ST-ZIP	DEERFIELD BEACH FL 33442			3.4. CITY-S	T- ZIP	DEEKEIRID DEACH, IL	<u> 5>147</u>	Addition		
TIRLE	VD		☐ DELETE	4.1 TITLE		•	Change	Addition		
NAME	DIGUARDIA, IGNATIOUS			4.2 NAME						
STREET ADDRESS	4035 BERKSHIRE B			4.3 STREET	ADDRESS					
CITY-ST-ZIP	DEERFIELD BEACH FL 33442			4.4 CITY-ST	r-ZIP					
TITLE	SD		☐ DELETE	5.1 TITLE			Change	Addition		
NAME	PLASTRIK, ANITA			5.2 NAME						
STREET ADDRESS	4040 BERKSHIRE B			5.3 STREET						
CITY-ST-ZIP	DEERFIELD BEACH FL 33442			5.4 CITY-S1	r-ZIP					
TITLE	TD		☐ DELETE	6.1 TITLE			☐ Change	Addition		
NAME	SCHNEIDER, JACK			6.2 NAME	ļ			ļ		
STREET ADDRESS	3040 BERKSHIRE B			6.3 STREET	ADORESS					
CITY-ST-ZIP	DEERFIELD BEACH FL 33442			6.4 CITY-ST			110 11 111 1	- 6 - max m 62		
14. I hereby o	certify that the information supplied with	this filing doe	s not qualify for the	exempti	on stated	in Section 119.07(3)(i), Florida Statutes. I further cer	tity that the ir	ntormation		

I hereby certify that the information supplied with this filling does not qualify for the exemple for success in Section 13.07(3)(f), 10 load statutes and 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, with all other life empowered.

SIGNATURE

ACKSSCHWEIDER FEIGHFÜRLICHEN
BIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIMECTOR

6/99 954-426-0160

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