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

**NONPROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

#### Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # 730335**

### CORONET HEIGHTS CONDOMINIUM, INC.

Principal Place of Business 350 S 17TH AVE

Mailing Address

350 S 17TH AVE

# **FILED** Jun 01, 1999 8:00 am Secretary of State

06-01-1999 90020 010 \*\*\*\*61.25

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HOLLYWOOD	FL 33020	HOLLIWOOD FL S	33020				<b>   </b>	[] [] [] [] [] [] [] [] [] [] [] [] [] [		
2. Principal Place of Business 2a. Mailing Add 21			dress			3. Date Incorporated or Qualifed 08/02/1974				
Suite, Apt. #, etc. Suite, Apt. #, etc			etc.			4. FEI Number		Apr	plied For	
22		27	<del>-</del>			59-1684937		Not	Applicable	
City & Stat	te	City & State	1=			5. Certifcate of Status Desired		\$8.75 Additional Fee Required		
Zip	Country Zip 29 3			Country		Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees		
24	9. Name and Address of Currer			T -		10. Name and Address of New F	Registered A	gent		
	o. Name and Address of Curren	. regional via		81	Name					
SANTONE, GREGORY WAYNE				82	Street Add	ress (P.O. Box Number is Not Accepta	able)			
350 S 17 AVE APT. #1				83			<del></del>			
HOLLYWOOD FL 33020				84	City			85 Zip C	ode	
				ļ_,		poration submits this statement for the	<u> </u>			
agent. 1 a	am familiar with, and accept the obliga	itions of, Section 617.0	1503, Florida Sta	itutes	•	on's board of directors. I hereby accepted when reinstaling)	DATE			
12.	OFFICERS AN	ID DIRECTORS	13			ADDITIONS/CHANGES TO OF	FICERS AND			
TITLE	PD	□ DE	LETE 1.1	TITLE				Change	Addition	
NAME	SANTONE, GREGORY WAYNE		1.2	NAME	1					
STREET ADDRESS			1.33	STREET	ADDRESS					
CITY-ST-ZIP	HOLLYWOOD FL 33020			CITY-S	T-ZIP			(7.0)	ED VANA	
TITLE	<b>SD</b> □ DELETE		LETE 2.1	TITLE				Change	Addition	
NAME	ZARCHIN, ANDREA		2.21	NAME						
STREET ADDRESS			2.3	STREET	ADDRESS					
CITY-ST-ZIP	HOLLYWOOD FL			CITY S	T-ZIP				T Addison	
TITLE	TD DELETE 13		ELETE 3.1	3.1 TITLE				Change	Addition	
NAME	TOCCHIO, DONATO			NAME						
STREET ADDRESS	1		3.3	STREET	T ADDRESS					
CITY-ST-ZIP	HOLLYWOOD FL 33020			CITY-S	IT-ZIP			Chanca	Addition	
TITLE		OE		TITLE				Change	Addition Addition	
NAME			Bi .	NAME						
STREET ADDRESS			4.3	STREE?	ADDRESS					
CITY-ST-ZIP				CITY-S	T-ZIP			Change	☐ Additio	
TITLE		□ DE		TITLE				☐ Change	☐ Accino	
NAME				NAME						
STREET ADDRESS					TADDRESS					
CITY OT 7ID			5.4	CITY-S	T-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), 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, with all other like empowered.

61 TITLE

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

DELETE

SIGNATURE:

CITY-ST-ZIP

STREET ADORESS

TITLE NAME

CR2E037 (11/98)

Change

Addition

**=** ii: