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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

Sulle, Apt. #, etc. City & State City & State City & State City & State Zip Country 8. This corporation has lability for intangible tax under 1.94 Port of provide Statutes Yes No Portice Statutes Yes No PARETTA, ANTHONY L., JR. 755 NW. 84TH LANE CORAL SPRINGS FL 33071 Ba Sirrect Address (F.O. Box Number is Not Acceptable) The 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 register or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Hereby accept the appointment as registered Agent. The Pursuant to the provisions of Sections 617.0503, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its register or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. Hereby accept the appointment as registered Agent. The Signature, typodo or printed name of inspited agent as the florida Statutes. NOTE: Registered Agent agent encountering. DATE 12. OFFICERS AND DIRECTORS IN 13. Street Address (F.O. Box Number is Not Acceptable) The Signature inspited agent and the purpose of changing agent an	1. Corporation	MENT # 736224 ERSITY HEIGHTS CONDOMIN	` '	INC.				
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9. Name and Address of Current Registered Agent 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name PARETTA, ANTHONY L., JR. 755 N.W. 84TH LANE CORAL SPRINGS FL 33071 82 Street Address (P.O. Box Number is Not Acceptable) 84 City FL 85 Zip Code 85 Zip Code 86 City Survival Street Address (P.O. Box Number is Not Acceptable) 86 Zip Code 87 City Survival Street Address (P.O. Box Number is Not Acceptable) 88 Zip Code 89 Zip Code 80 Zip		Country		Countr	/	The state of the s	Adde	
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755 N.W. 84TH LANE CORAL SPRINGS FL 33071 83 64 City FL 85 Zip Code Familiar with, and accept the obligations of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent. Signature 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN THE BALLEY, LAUCE 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS 13. STREET ADDRESS CITY-ST-ZIP BOCA RATON FL 33432 14. CITY-ST-ZIP MCGUIRE, KAREN 13. STREET ADDRESS 14. CITY-ST-ZIP BOCA RATON FL 33432 14. CITY-ST-ZIP MC GUIN, TUESDEE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 13. STREET ADDRESS 14. CITY-ST-ZIP BOCA RATON FL 33432 14. CITY-ST-ZIP MC GUIN, TUESDEE 1800 NW 4TH AVE #13 23. STREET ADDRESS 1800 NW 4TH AVE #13 33. STREET ADDRESS 1800 NW 4TH AVE #14 34. STREET ADDRESS 1800 NW 4TH AVE #14 35. STREET ADDRESS 1800 NW 4TH AVE #14 35. STREET ADDRESS 1800 NW 4TH AVE #14 35. STREET ADDRESS 1800 NW 4TH AVE #15 35.	PARETT	TA ANTHONY I ID						
T11. 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 register 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 egent. SIGNATURE Signature, hipsed or printed name of registered agent and lite if applicable. NOTE: Registered Agent signature required when reinstating. DATE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1.1 TITLE DATE 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1.2 NAME SIRRET ADDRESS SIRRET ADDRESS SIRRET ADDRESS 1800 NW 4TH AVE- APT. 13A 13. STREET ADDRESS 1800 NW 4TH AVE- APT. 13A 1800 NW 4TH AVE- APT				82	Street	Address (P.O. Box Number is Not Acceptable	θ)	
TI. 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 register of 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. SIGNATURE Signature, typed or printed name of registered agent and title if applicable. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN THE BAILEY, LAUCE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN THE BAILEY, LAUCE 12. NAME BAILEY, LAUCE 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN THE BAILEY, LAUCE 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN THE BAILEY, LAUCE 12. NAME STREET ADDRESS 1800 NW 4TH AVE- APT. 13A 13. STREET ADDRESS 1800 NW 4TH AVE- APT. 13A 13. STREET ADDRESS 1800 NW 4TH AVE- APT. 13A 13. STREET ADDRESS 1800 NW 4TH AVE- APT. 13A 13. STREET ADDRESS 1800 NW 4TH AVE- APT. 13A 13. STREET ADDRESS 1800 NW 4TH AVE- APT. 13A 13. STREET ADDRESS 1800 NW 4TH AVE- APT. 13A 13. STREET ADDRESS 1800 NW 4TH AVE- APT. 13A 13. STREET ADDRESS 1800 NW 4TH AVE- APT. 13A 13. STREET ADDRESS 1800 NW 4TH AVE- APT. 13A 13. STREET ADDRESS 1800 NW 4TH AVE- APT. 13A 13. STREET ADDRESS 1800 NW 4TH AVE- APT. 13A 23. STREET ADDRESS 1800 NW 4TH AVE- APT. 13A 23. STREET ADDRESS 1800 NW 4TH AVE- APT. 13A 23. STREET ADDRESS 1800 NW 4TH AVE- APT. 13A 23. STREET ADDRESS 1800 NW 4TH AVE- APT. 13A 23. STREET ADDRESS 1800 NW 4TH AVE- APT. 13A 24. CITY- ST- ZIP 11TILE 17				83				
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SIGNATURE Signature, typod or printed name of registared agent and bite if applicable NOTE: Registered Agent signature required when reinstating)	or register familiar wi	red agent, or both, in the State of Florida ith, and accept the obligations of, Section	Such change was authorized 617,0503. Florida Statutes	ed by the corp	oration's	board of directors. I hereby accept the appo	ose of changing its r intment as registered	egistered office agent. I am
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OS STREET ADDRESS								
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 fur certify that the information indicated on this annual report or supplemental annual report is furue and accurate and that my signature shall have the same legal effect as if made to oath; that I am an officer or director of the corporation or the receiver or trustee emogwered to execute this report as required by Chartes 17. Florida Statutes.	14. I do hereb	y certify that the information supplied with	this filing is voluntarily furni	shed and doe	not ous	lify for the exemption stated in Section 440.0	7/2VW Etnet - Cont.	o 14 mate -

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 O	L	farite	tale	HATHON	y 2.	PARIOTHA ST
İ		SIGNATURE AND TYPED C	R PRINTED N	IAME OF SIGNING O	FFICE OR DIREC	CTOR	, —	Date

1/24/91 9/1 7/2-4/3 Destrine Prione #