

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 736314 (6)

1. Corporation Name

UPMINSTER M CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

Mailing Address

CENTURY VILLAGE EAST
UPMINSTER M-226
DEERFIELD BEACH FL 33442

CENTURY VILLAGE EAST
UPMINSTER M-226
DEERFIELD BEACH FL 33442

3. Date Incorporated or Qualified

07/07/1976

3a. Date of Last Report

05/01/1995

4. FEI Number

59-1906010

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution

☐

\$5.00 May Be
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☒ No

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

MILLER, DIANE
UPMINSTER M-226
DEERFIELD BEACH FL 33442

81. Name

82. Street Address (P.O. Box Number is Not Acceptable)

83.

84. City

FL

85. Zip Code

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD
NAME MILLER, DIANE
STREET ADDRESS UPMINSTER M-226
CITY-ST-ZIP DEERFIELD BCH, FL 0

TITLE VDS
NAME KRISLER, SIMON
STREET ADDRESS UPMINSTER M-224
CITY-ST-ZIP DEERFIELD BCH, FL

TITLE TD
NAME JACOB, WALTER
STREET ADDRESS TILFORD 0372
CITY-ST-ZIP DEERFIELD BEACH FL

TITLE Director
NAME CORY ZUCKER
STREET ADDRESS UPMINSTER M-224
CITY-ST-ZIP DEERFIELD BEACH, FL 33442

TITLE Director
NAME ARON Kanner
STREET ADDRESS UPMINSTER M-226
CITY-ST-ZIP DEERFIELD BEACH, FL 33442

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS-CHANGES TO OFFICERS AND DIRECTORS IN 12

11. TITLE ☐ Change ☐ Addition
12. NAME
13. STREET ADDRESS
14. CITY-ST-ZIP ☐ Change ☐ Addition

21. TITLE ☐ Change ☐ Addition
22. NAME
23. STREET ADDRESS
24. CITY-ST-ZIP ☐ Change ☐ Addition

31. TITLE ☐ Change ☐ Addition
32. NAME
33. STREET ADDRESS
34. CITY-ST-ZIP ☐ Change ☐ Addition

41. TITLE ☐ Change ☐ Addition
42. NAME
43. STREET ADDRESS
44. CITY-ST-ZIP ☐ Change ☐ Addition

51. TITLE ☐ Change ☐ Addition
52. NAME
53. STREET ADDRESS
54. CITY-ST-ZIP ☐ Change ☐ Addition

61. TITLE ☐ Change ☐ Addition
62. NAME
63. STREET ADDRESS
64. CITY-ST-ZIP

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***15128.75

4/27/96 case

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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E037 (12/95)