

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

**CORPORATION
ANNUAL REPORT
1995**



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

**APPROVED
AND
FILED**

95 APR -6 AM 6:17

**SECRETARY OF STATE
TALLAHASSEE, FLORIDA**

DOCUMENT # 738570 (1)

1. Corporation Name

**ROYAL PLAZA CONDOMINIUM ASSOCIATION OF FORT LAUD
ERDALE, INC.**

Principal Place of Business

Mailing Address

**2862 N.E. 32ND ST
FT. LAUDERDALE FL 33306**

**2862 N.E. 32ND ST
FT. LAUDERDALE FL 33306**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

04/05/1977

3a. Date of Last Report

03/30/1994

4. FEI Number

59-1821266

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**

7. Nonprofit with IRS 501(c)(3)
Tax Exempt Status

☒

**\$68.75 Supplemental
Fee Not Required**

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

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

FL

B5 Zip Code

**GINGRAS, MARIO
2862 N.E. 32ND ST.
CONDO #12
FT. LAUDERDALE FL 33306**

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
GINGRAS, MARIO
2862 NE 32ND ST #12
FT LAUDERDALE FL**

1.1 TITLE ☐ Change ☐ Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
HACKL, JOSEPH
2864 NE 32ND ST NO 1
FT LAUDERDALE FL**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
LAVOLETTE, JOHN
2862 N.E. 32ND ST. #9
FT LAUDERDALE FL 33306**

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP
**D
LUEKER, ELMER
2901 PALM AIRE DRIVE SOUTH #507
POMPANO BEACH FL 33060**

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY - ST - ZIP

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY - ST - ZIP

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 110.07(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

Signature (Print Name)

0040902

738570

Summary Report
1/1/94 Through 12/31/94

1/ 9/95
94PLAZA-SUN BANK

Page 1

Category Description	1/1/94- 12/31/94

INCOME/EXPENSE	
INCOME	
BEG-YEAR	4,636.39
MTCE -FEES	17,486.00
MTCE+ATT.FEES	2,914.37
NEWRENT.FEES	100.00
Other-REV.	599.16
POOL-ASSESS.	3,500.00
Income - Other	160.00

TOTAL INCOME	29,395.92
EXPENSES	
ANN.CORP.REPORT	61.25
ANNUAL FEES	56.00
ATT.FEES	750.00
CABLE-TV	2,337.26
GARDEN MTCE.	2,160.00
INSURANCE	1,977.65
MAJOR PROJECTS	4,647.60
MISC-EXPENSES	1,348.05
MTCE&REPAIRS	2,947.85
POOL MTCE.	1,272.62
TRASH DISPOSAL	1,220.31
UTILITIES	1,537.37
WATER USAGE	2,150.67

TOTAL EXPENSES	22,466.63

TOTAL INCOME/EXPENSE	6,929.29
Balance Forward	
CHECKING	-125.21

Total Balance Forward	-125.21

OVERALL TOTAL	6,804.08
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