

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

CORPORATION  
ANNUAL REPORT  
1995



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

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS

95 MAR 30 AM 9:29

DOCUMENT # **739461** (2)  
1. Corporation Name  
**ATLANTIC BEACH VILLAS CONDOMINIUM ASSOCIATION, I NC.**

Principal Place of Business Mailing Address  
**5450 NORTH OCEAN BLVD. #52 FT. LAUDERDALE FL 33308** **5450 NORTH OCEAN BLVD. #52 FT. LAUDERDALE FL 33308**

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified <b>06/23/1977</b>	3a. Date of Last Report <b>04/15/1994</b>
4. FEI Number <b>59-1752278</b>	Applied For <input type="checkbox"/> Not Applicable <input type="checkbox"/>
5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75</b> Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00</b> May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status <input type="checkbox"/>	<b>\$68.75</b> Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business <b>21</b>	2a. Mailing Address <b>26</b>
Suite, Apt. #, etc. <b>22</b>	Suite, Apt. #, etc. <b>27</b>
City & State <b>23</b>	City & State <b>28</b>
Zip <b>24</b>	Country <b>25</b>
Zip <b>29</b>	Country <b>30</b>

9. Name and Address of Current Registered Agent <b>BRERETON, LILAH M. 5450 N. OCEAN BLVD., #52 FT. LAUDERDALE FL 33308</b>		10. Name and Address of New Registered Agent	
<b>81</b> Name			
<b>82</b> Street Address (P.O. Box Number is Not Acceptable)			
<b>83</b>			
<b>84</b> City	<b>FL</b>	<b>85</b> Zip Code	

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 reappointing)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE <b>PD</b>	NAME <b>BRERETON, JOHN</b>	11 TITLE <b>DVP</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>5450 N OCEAN BLVD</b>	CITY - ST - ZIP <b>FT LAUDERDALE, FL 00000</b>	12 NAME <b>XXXXXXXXXXXX</b>	
		13 STREET ADDRESS <b>Brereton, John</b>	
		14 CITY - ST - ZIP	
TITLE <b>DVP</b>	NAME <b>KENNEDY, ROBERT J.</b>	21 TITLE <b>D</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>5450 N OCEAN BLVD</b>	CITY - ST - ZIP <b>FT LAUDERDALE, FL 00000</b>	22 NAME <b>Kennedy, Robert</b>	
		23 STREET ADDRESS	
		24 CITY - ST - ZIP	
TITLE <b>D</b>	NAME <b>WILLIAM KILLEBREW</b>	31 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>5450 N OCEAN BLVD</b>	CITY - ST - ZIP <b>FT LAUDERDALE, FL 00000</b>	32 NAME	
		33 STREET ADDRESS	
		34 CITY - ST - ZIP	
TITLE <b>D</b>	NAME <b>HOFMANN, HELMUT</b>	41 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>5450 N OCEAN BLVD</b>	CITY - ST - ZIP <b>FT LAUDERDALE, FL 00000</b>	42 NAME	
		43 STREET ADDRESS	
		44 CITY - ST - ZIP	
TITLE <b>D</b>	NAME <b>SIMERI, JOE</b>	51 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>5450 N. OCEAN V.D.</b>	CITY - ST - ZIP <b>FT. LAUDERDALE FL</b>	52 NAME	
		53 STREET ADDRESS	
		54 CITY - ST - ZIP	
TITLE <b>D</b>	NAME <b>LUCAS, ROBERT</b>	61 TITLE <b>PD</b>	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
STREET ADDRESS <b>5450 N OCEAN BLVD</b>	CITY - ST - ZIP <b>FT LAUDERDALE FL</b>	62 NAME <b>Lucas, Robert</b>	
		63 STREET ADDRESS	
		64 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 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 changed, or on an attachment with an address.

SIGNATURE: *John Brereton* **3/27/95** 305-781-7866  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
**JOHN BRERETON, Vice President**