FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

Feb 19, 1999 8:00 am Secretary of State 02-19-1999 90101 024 ****70.00

FILED

DOCUMENT # 740600

1. Corporation Name

STEEPLECHASE PROPERTY OWNERS' ASSOCIATION, INC.

Principal Place of Business Mailing Address									
P.O. BOX 31175 PALM BEACH GARDENS FL 33420 P.O. BOX 31175 PALM BEACH GARDENS FL			FL 33420	. 33420					
3 0 1 1 1 1 1									-
2. Principal Place of Business 2a. Mailing Address						3. Date Incorporated o	r Qualifed		
21 26						11/02/1977			
Suite, Apt. #, etc. Suite, Apt. #, etc.						4. FEI Number		Ar	plied For
22 27						59-1824597			ot Applicable
City & State		City & State			5. Certifcate of Status I	Desired A		Additional .	
23	28					- Commons of Grands	74	Fee Re	equired
Zip	Country	Zip Cou				6. Election Campaign F	- 11	\$5.00	May Be
24	25 29 30				Trust Fund Contribution Adde			Added	to Fees
Name and Address of Current Registered Agent					41	10. Name and Address of New Registered Agent			
				81	Name				
FIELDS, GARY				82	Street Address (P.O. Box Number is Not Acceptable)				
4400 PGA BLVD STE 700									
19TH FLOOR				83					*
PALM BCH (GARDENS FL 33401			84	City	<u> </u>			
			:	04	City		F	85 Zip (code .
11. Pursuant to	the provisions of Sections 617.0502 a	ind 617.1508, Florida Statut	es, the al	ove-	named corp	oration submits this stateme	-1611		registered
	istered agent, or both, in the State of familiar with, and accept the obligation				he corporation	on's board of directors. I her	eby accept the ap	pointment as re	gistered
SIGNATURE	, , ,						_		
	nature, typed or printed name of registered agent ar	d title if applicable. (NOTE	Registered	Agent	signature required	d when reinstating)	DATE		
12.	OFFICERS AND		13.			ADDITIONS/CHANGE		AND DIRECTO	RS IN 12
TITLE D		☐ DELETE	1,1 T)T	LΕ				☐ Change	Addition
NAME Y	anik, gary		1.2 NA	MĘ					
STREET ADDRESS 8718 MAN-O-WAR RD			13.57	1.3 STREET ADDRESS					*
1				1.4 CITY-ST-ZIP					.
TITLE D				2.1 TITLE				☐ Change	Addition
	RENAUD, GLEN C.		22 NAME						ر «انفلالک ک
	I amount and have a control of the c		2.3 STREET ADDRESS		222200				
I	PALM BCH GRDNS, FL 00000				·		•		. 44. 5
	PD DELETE		2.4 CITY-ST-ZIP		ZIP				
1 ' '	<u> </u>			1			•	☐ Change	Addition
	KANEL, AMIR			3.2 NAME					
	8332 MAN-O-WAR ROAD		1	3.3 STREET ADDRESS					
	PALM BEACH GARDENS FL			3.4. CITY-ST-ZIP		·		٠.	
0	-			4.1 TITLE				Change	☐ Addition
	ONKS, MICHAL		4.2 NA	4. 2 NAME					
			4.3 STF	4.3 STREET ADDRESS					1
			4.4 C(T	4.4 C/TY-ST-ZIP					
TITLE D		☐ DELETE	5.1 TITLE					☐ Change	Addition
	ARNETT, CHARLES		5.2 NAA						1
	112 NATIVE DANCER ROAD		5.3 STR	REETA	DORESS				· 1
	<u>ALM BEACH GARDENS FL 33418</u>		5.4 CIT	Y-\$T-Z	ZIP			ı	
TITLE		☐ DELETE	6.1 TITL	.E				☐ Change	Addition
NAME			6.2 NAM	Æ				_ •	_
STREET ADDRESS			6.3 STR	EETAI	ODRESS				

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, witb all other like empowered.

SIGNATURE: