FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT #

(9)

CANTERRIEV I COMPONIMIUM ACCOCIATION, INC.

OARTERBORT I CORDOMINIUM ASSOCIATION, INC.						
Principal Place of Business		Mailing Address		C CORTIN TABLIC BIBLIS (CAN) (BARDA BILIND 1981 BARLI	L BINGS BIESE BINSS BINSS BINSS 1904	
207 CANTERBURY W PALM BCH FL 33417 US		207 CANTERBURY W PALM BCH FL 33417 US		3. Date Incorporated or Qualified 05/08/1978		
					4. FEI Number 59-1636651	Applied For Not Applicable
2. Principal i	Place of Business	2a. Mailing Address				\$8.75 Additional
21		26	26		5. Certificate of Status Desired	Fee Required
Suite, Apt. #, etc.		Suite, Apt. #, etc.	⊢ '''		Election Campaign Financing	\$5.00 May Be
City & State : .		City & State	City & State		Trust Fund Contribution	Added to Fees
23		— · · · · · · · · · · · · · · · · · · ·	26		7. Is this nonprofit corporation a homeow	
Zip			Countr	у	8. This corporation owes or has paid the	
24	25	29	30		Personal Property Tax due June 30.	☑ Yes ☐ No
	9. Name and Address of Curre	nt Registered Agent			10. Name and Address of New Registers	ed Agent
			81	Name		
NAGBY, NETTIE 207 CANTERBURY I			82	Street A	Address (P.O. Box Number is Not Acceptable)	
	ALM BEACH FL 33417		83	1		
WEO! F	ALM DEACH FL 99417					
			84	City	F	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 register 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 registere agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.						
SIGNATURE						
12.	Signature, typed or printed name of registered ag	· 		eni signature r	equired when reinstaling} DATE	
TITLE	S OFFICERS AN	ID DIRECTORS	13.	-	ADDITIONS/CHANGES TO OFFICERS A	La honon Addition
NAME	LITT, ADREINNE M.	-				•
STREET ADDRESS	198 CANTERBURY I			T ADDRESS	191 CANTERBUR	YI
CITY-ST-ZIP	WEST PALM BEACH FL		1.4 CITY-	ST-ZIP	WEST PALM BEACH	FLA.
TITLE	T	☐ DELETE	2.1 TITLE		VINCENT LAGNO	Change Addition
NAME	NAGBY, NETTIE		2.2 NAME		VINCENT LAGNE	ENA
STREET ADDRESS	207 CANTERBURY I	ė.		T ADDRESS	206 CANTERBU	RY I
CITY-ST-ZIP TITLE	WEST PALM BEACH FL	DELETE	2. 4 CITY- 3.1 TITLE	ST-ZIP	206 CANTERBU WEST PALM BEAG	Change Addition
NAME	SPILKEN, ROWENA	E Ditti	3.7 (TILE 3.2 NAME			Cuanda Cuanda
STREET ADDRESS	200 CANTERBURY I			T ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH FL	/	3.4. CITY-			
TITLE	8	DELETE	4,1 TITLE			☐ Change ☐ Addition
NAME	BURZIN, MURRAY		. 2 NAME	1		
STREET ADDRESS			4.3 STREE	T ADDRESS		
CITY-ST-ZIP			4.4 CITY - :	ST-ZIP		
TITLE	D COMMADTS DUTH	DELETE	5.1 TITLE			Change Addition
NAME OTDEET ADDRESS	SCHWARTZ, RUTH 191 CANTERBURY I		5.2 NAME	1		
STREET ADDRESS	WEST PALM BEACH FL			ADDRESS		
CITY-ST-ZIP TITLE	D DEACH PL	☐ DELETE	6.1 TITLE	51 - ZIP		Change Addition
NAME	GOLDBERG, MINNIE		6.2 NAME		0000024234	
STREET ADDRESS	199 CANTERBURY I			ADDRESS	~UZ/U5/36~~U1UZS~~!	ደረ ተያ"
	W DALM DEACH EL		I		***61.25	2.4

14. 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 supplimental 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.

6.4 CITY - ST - ZIP

FILED

Feb 04 1998 8:00am

Secretary of State