FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT**

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(7)

NOBEL POINT CONDOMINIUM ASSOCIATION, INC.

Principal Plac	e of Business	Mailing Address			
1100 SE 5TH C POMPANO BEA		1100 SE 5TH COURT POMPANO BEACH FL 3308	D-81 0 0		
				3. Date Incorporated or Qualified 05/10/1978	3a. Date of Last Report 02/08/1996
21	lace of Business	2a. Mailing Address		4. FEI Number 59-2046656	Applied For Not Applicable
Suite, Apt.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State		City & State		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip 24	Country 25		Country 30		Yes No
	9. Name and Address of Curren	t Registered Agent	81 Name	10. Name and Address of New Re	egistered Agent
DCI L DATOICIA					
BELL, PATRICIA CAMPBELL PROPERTY MANAGEMENT INC			82 Street	Address (P.O. Box Number is Not Accepta	ble)
1215 E HILLSBORO BLVD			83		
	LD BEACH FL 33441		84 City		85 Zip Code
					FL T
11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statules, 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 Statules.					
SIGNATURE .	Signature, typed or printed name of registered age	nt and title II applicable. (NOTE	: Rog stered Agent signature	· · · · · · · · · · · · · · · · · · ·	DATE
12.	OFFICERS AND		13.	ADDITIONS/CHANGES TO OFFI	
TITLE	PD ALAN	DELETE	1.1 10115	PD DEVINE THE	K) Change
NAME	HEILPERN, ALAN 1100 SE 5TH COURT #64		1.2 NAME	DEVANE, LEE	. 4100
STREET ADDRESS	POMPANO BEACH FL 33060		1.3 STREET ADDRESS		**
CITY-ST-ZIP TITLE	VD	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE	Pompano Beach, Flo	Change Addition
NAME	RAPPA, ED		2.2 NAME		E Change E Roomon
STREET ADDRESS	1100 SE 5TH COURT #18		2.3 STREET ADDRESS	}	
CITY-ST-ZIP	POMPANO BCH FL 33060		2. 4 CITY-ST-ZIP		
TITLE	\$D	DELETE	3.1 1/1LE	SD	Change Addition
NAME	BATTLE, COLIN		3.2 NAME	SCHROEDER, CAROL	
STREET ADDRESS	1100 SE 5TH COURT #10		3.3 STREET ADDRESS	1100 S.E.5th Court	. #87
CITY-ST-ZIP	POMPANO BEACH FL 33060		3 4. CITY+ST-ZIP	Pompano Beaach, Fl	
TITLE	TD	☐ DELETE	4.1 TITLE		Change Addition
NAME	SPENGART, DEBORAH		4. 2 NAME		
STREET ADDRESS	1100 SE 5TH COURT #85		4.3 STREET ADDRESS		
CITY-ST-ZIP	POMPANO BEACH FL 33060		4.4 CITY - ST - ZIP		
TITLE		DELETE	5.1 TITLE		Change Addition
NAME	•		5.2 NAME		
STREET ADDRESS			5.3 STREE1 ADDRESS		
CITY-ST-ZIP			5.4 CITY-ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
NAME STREET ADDRESS CITY-ST-ZIP TITLE	SPENGART, DEBORAH 1100 SE 5TH COURT #85	☐ DELETE	4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE	·	
1					
	FOMPANO BEACH FL 33080	T Secrete			
		☐ DELETE			☐ Change ☐ Addition
1		ר סנונונ			Change C Addition
		DELETE			Channe Addition
1		•]	- i
2072 62 70			0.00		

14. I do 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 charged, or by an attachment with an address.

SIGNATURE:

3-31-1997

FILED

Apr 08 1997 8:00am

Secretary of State