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ROFIT ~HPORATION **NNUAL REPORT** 

POCUMENT #



744584

FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

## **FILED** Jun 10, 1999 8:00 am Secretary of State

06-10-1999 90038 001 \*2,695.00

J74044 - 90038 - 39

VICTORIA VILLAGE "H" CONDOMINIUM ASSOCIATION, IN					37.4044 - AD028 - 3A				
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<u> </u>									EKAN EKAN IARI
Principal Plac	ce of Business	Mailing Address				i saduku kadus diasu audus diidu sadi	is miðt higgs þi	BIR BIBIR BIBIR.	BIRTH BIRTH (ARL
1310 AVENUE OF THE STARS 1310 AVENUE OF THE STARS					ì	3 5212			
COCONUT CREEK FL 33066 COCONUT CREEK FL 33066						3. Date incorporated or Qualified	a		
บร		บร			)	10/13/1978 4. FEI Number		<del>-    </del>	nation Co.
						59-1814324		<b>—</b>	Applied For lot Applicable
2. Principal f	Place of Business	2a. Mailing Address							Additional
21		26			į	5. Certificate of Status Desired			Required
Suite, Apt.	. #. etc.	Suite, Apt. #, etc.				6. Election Campaign Financing			May 8e
22		27				Trust Fund Contribution			to Fees
City & Sta	te	City & State				7. Is this nonprofit corporation a			on?
23		28						No No	
Zıp	Country	Zip	Countr	у		8. This corporation owes or has			
24	9. Name and Address of Current		30		}	Personal Property Tax due Ju 10. Name and Address of New I			∐ No
<del></del>	s. Name and Address of Current	Hegistered Agent	81	Name		10. Raile and Address of New I	negistered	Ageill	
						·····	_		
RAVO, PAT T.			82	Street	t Addres	Address (P.O. Box Number is Not Acceptable)			
	VENUE OF THE STARS MOOR COMMUNITY COUNCIL,INC	•	83	-	·				
1	MOOR COMMONITY COUNCIL, INC IUT CREEK FL 33066	••	L	<u> </u>					
COCON	IOT CHEEK FE 33000		84	City			FI	<b>85</b> Zip	Code
11. Pursuant	to the provisions of Sections 617.0502	and 617,1508, Florida Statute	s, the abov	e-name	d corpor	ation submits this statement for the	purpose o	f changing	its registered
office or i	to the provisions of Sections 617.0502 registered agent, or both, in the State of am familiar with, and accept the obligation	of Florida, Such change was as	uthorized b	y the co	rporation	n's board of directors. I hereby acc	ept the app	pointment as	s registered
1	and accept the congan	iona or, section on .0300, no	ida Otaldic	٥.					
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE.	Registered Ag	ent signatui	re required	when reinstating)	DATE		<del></del>
12.	Signature, typed or printed name of registered agent OFFICERS AND	DIRECTORS	Registered Ag	ent signatui		ADDITIONS/CHANGES TO OFF			
	OFFICERS AND	<del></del>		ent signatui	Pr	ADDITIONS/CHANGES TO OFF		DIRECTOR	RS IN 12
12.	PD FOX, ALLAN	DIRECTORS	13. 1.1 TITLE 1.2 NAME		Pr	ADDITIONS/CHANGES TO OFF			
12.	PD FOX, ALLAN 2904 L3 VICTORIA PL	DIRECTORS	13. 1.1 TITLE 1.2 NAME		Pr	ADDITIONS/CHANGES TO OFF			
12. TITLE NAME STREET ADDRESS CITY-ST-ZIP	PD FOX. ALLAN 2904 L3 VICTORIA PL COCONUT CREEK, FL 00000	DIRECTORS  DELETÉ	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY-	T ADDRESS	Pr	ADDITIONS/CHANGES TO OFF		☐ Change	☐ Addition
12. TITLE NAME STREET ADDRESS CITY-SI-ZIP TITLE	PD FOX. ALLAN 2904 L3 VICTORIA PL COCONUT CREEK, FL 00000 TD	DIRECTORS	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE	T ADDRESS	Pr	ADDITIONS/CHANGES TO OFF			
12. TITLE NAME STREET ADDRESS CITY+SI-ZIP TITLE NAME	PD FOX, ALLAN 2904 L3 VICTORIA PL COCONUT CREEK, FL 00000 TD GOLDBERG, ANNETTE	DIRECTORS  DELETÉ	13. 1.1 TITLE 1.2 NAME 1.3 STREE 1.4 CITY- 2.1 TITLE 2.2 NAME	T ADDRESS ST - ZIP	Pr	ADDITIONS/CHANGES TO OFF		☐ Change	☐ Addition
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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 or an attachment with an address.

SIGNATURE: