

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

DOCUMENT # **744586** (9)

1. Corporation Name

VICTORIA VILLAGE "K" CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

Mailing Address

1310 AVENUE OF THE STARS
COCONUT CREEK FL 33066
US

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COCONUT CREEK FL 33066
US

3. Date Incorporated or Qualified
10/13/1978

3a. Date of Last Report
04/26/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

28 City & State

24 Zip 25 Country

29 Zip 30 Country

4. FEI Number
59-1836013

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RAVO, PAT T.
1310 AVENUE OF THE STARS
% WYNMOOR COMMUNITY COUNCIL, INC.
COCONUT CREEK FL 33066

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

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 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 Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and date of application

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD DELETE
NAME RANDOLPH, MOSS
STREET ADDRESS 2805 H2 VICTORIA WAY
CITY-ST-ZIP COCONUT CREEK FL

11 TITLE Change Addition
12 NAME
13 STREET ADDRESS
14 CITY-ST-ZIP Change Addition

TITLE VPD DELETE
NAME COHEN, SAMUEL
STREET ADDRESS 2805 B-1 VICTORIA WAY
CITY-ST-ZIP COCONUT CREEK FL

21 TITLE Change Addition
22 NAME
23 STREET ADDRESS
24 CITY-ST-ZIP Change Addition

TITLE D DELETE
NAME NEWMAN, JULIUS
STREET ADDRESS 2805 D1 VICTORIA WAY
CITY-ST-ZIP COCONUT CREEK FL

31 TITLE Change Addition
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP Change Addition

TITLE AD DELETE
NAME KATZMAN, SOL
STREET ADDRESS 2805 F2 VICTORIA WAY
CITY-ST-ZIP COCONUT CREEK FL

41 TITLE Change Addition
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP Change Addition

TITLE D DELETE
NAME LEVIN, SAMUEL D
STREET ADDRESS 2805 C1 VICTORIA WAY
CITY-ST-ZIP COCONUT CREEK FL

51 TITLE SID Change Addition
52 NAME
53 STREET ADDRESS
54 CITY-ST-ZIP Change Addition

TITLE TD DELETE
NAME KATZ, IDA
STREET ADDRESS 2805 E2 VICTORIA WAY
CITY-ST-ZIP COCONUT CREEK FL

61 TITLE Change Addition
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP Change Addition

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 if changed, or on an attachment with an address.

SIGNATURE: *Moss Randolph*
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Pres Feb. 15/96 (954) 968-2527
DATE Daytime Phone #

CR2E037 (12/95)