FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1998 DOCUMENT # 745553

(8)

NORTHWEST 45 STREET CLUB CONDOMINIUM ASSOCIATION

INC.						
Principal Place of Business Mailing Address						/
IATION INC.						
2501 NE 46 ST	r	PO BOX 5875			3. Date Incorporated or Qualified	
LIGHTHOUSE POINT FL 33064 LIGHTHOUSE POINT FL 3			33074		01/12/1979 4. FE! Number	
US		US			59-2378016	Applied For Not Applicable
2. Principal Place of Business 2a. Mailing Address						\$8.75 Additional
		26	26		5. Certificate of Status Desired	Fee Regulred
Suite, Apt	Suite, Apt. #, etc.			6. Election Campaign Financing	\$5.00 May Be	
City & State		27	City & State		Trust Fund Contribution	Added to Fees
23	le .	28			7- Is this nonprofit corporation a homeowners	s association? ☐ No
Zip	Country	Zip	Count	ν		
24	25	29	——————————————————————————————————————		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.	
	9. Name and Address o	f Current Registered Agent			10. Name and Address of New Registered A	
]			8:	l Name		
SEITZ, CHARLES J.				2 Street Ad	dress (P.O. Box Number is Not Acceptable)	
2501 NE 46 STREET				1		
LIGHTHOUSE POINT FL 33064			83	3		
			84	City		85 Zip Code
44 70	to the second decree of O - N	047 0500		<u> </u>	<u> </u>	
office or i	to the provisions of Sections registered agent, or both, in t	617.0502 and 617.1508, Florida Stati he State of Florida. Such change was	utes, the abov s authorized b	re-named co. by the corpora	rporation submits this statement for the purpose of ation's board of directors. I hereby accept the appointment of the purpose of the purpose of the appointment of the purpose of the pur	changing its registered
agert. Ja	im familiar with, and accept to	ne obligations of, Section 617.0503, F	Florida Statute	es.		.
SIGNATURE	Signature, typed or printed name of reg	Island anent and title if annicable (NC	TE Booletoned Ac	ant algorithm real	uked when reinstating) DATE	
12.		ERS AND DIRECTORS	13,	leur aighaithe red	ADDITIONS/CHANGES TO OFFICERS AND	DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TITLE			☐ Change ☐ Addition
NAME	SEITZ, CHARLES J.		1.2 NAME			- · · ·
STREET ADDRESS	REET ADDRESS 2501 NE 46 STREET		1.3 STREET ADDRESS			
CITY-ST-ZIF	LIGHTHOUSE POINT FL		1,4 CITY-	ST-ZIP		
TITLE	VD DELETE		2.1 TITLE			Change Addition
NAME	Davis, Frank	2	2.2 NAME			
STREET ADDRESS	1401-8 N.W. 45TH ST.		2.3 STREE	T ADDRESS		
CITY - ST - ZIP	POMPANO BCH, FL 00	~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~ ~	2. 4 CITY-	ST-ZIP		
TITLE	SD	☐ DELETE	3,1 TITLE			Change Addition
NAME .	HODGSON, DIANE		3.2 NAME			
STREET ADDF-ESS	1441-6 N.W. 45TH ST.			T ADDRESS		
CITY-ST-ZIP	POMPANO BCH, FL 00		3.4. CITY-	ST-ZIP		
TITLE	TD L DELETE		4.1 TITLE		L	☐ Change ☐ Addition
NAME	FRIES, MARI		4. 2 NAME	1		
STREET ADDRESS	2660 SE 2ND ST.		- 1	T ADDRESS		
CITY-ST-ZIP TITLE	POMPANO BCH, FL 00	UUU DELETE	4.4 CITY-5	ST-ZIP		Ohanaa I I baadii aa
NAME		L DELETE	5.1 TITLE		L	Change L Addition
STREET ADDRESS	•		5.2 NAME	. ADDDTCC		
CITY-ST-ZIP			5.3 STREET			
TITLE	649/2	DELETE	5.4 CITY - 5 6.1 TITLE	SI-ZIP		Change Addition
NAME			6.2 NAME	ļ	'	T Analitie T Maditiolit
STREET ADDRESS			6.3 STREET	Annage		
CITY CT 7/D			0.3 STREET	NUUNESS		

14. I hereby certify that the information supplied with this filling 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.

SIGNATURE:

FILED

Feb 06 1998 8:00am

Secretary of State