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NONPROFIT CORPORATION ANNUAL REPORT



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

1996
DOCUMENT #

746317

(7)

## BUILDING EIGHT OF COUNTRY CLUB APARTMENTS AT BON AVENTURE 32 CONDOMINIUM ASSOCIATION, INC.

	of Business	Mailing Address			T I APPRIL IDDAL DIDIG BURGO KUDU RETU		
C/O NORDE MANAGEMENT CORP 6047 KIMBERLY BLVD STE N 6047 KIMBERLY BLVD							
N LAUDERDALE FL 33068		N LAUDERDALE FL 33068		3. Date Incorporated or Qualified 3a. Date of Last Report 03/20/1979 05/01/1995			
2. Principal Place of Business		2a. Mailing Address			4. FEI Number 59-1939606		Applied For
Code Ast H at		26					Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			5. Certificate of Status Desired	, ,	.75 Additional see Required
City & State		City & State			6. Election Campaign Financing Trust Fund Contribution		\$5.00 May Be Added to Fees
Zip	Country	Zıp	Country		8. This corporation has liability for in	ntangible tax unde	<del></del>
1	9. Name and Address of Curre	29 ent Registered Agent	[30]		Florida Statutes  10. Name and Address of New Re	Yes No	
		one construction of the co	81	Name	TO. INSTITUTE OF THE PROPERTY	Saroton Macin	
REDVAL	EIMER, EDWARD R			NE CONTRACTOR OF THE	700 Day North College		
	MBERLY BLVD STE N		82	Street Addres	ss (P.O. Box Number is Not Acceptable	e)	
	ERDALE FL 33068		83	<del></del>	· · · · · · · · · · · · · · · · · · ·		
11 0100	ELIDALE I E GGGGG		اما				
			84	Dity		FL  85	Zip Code
or register familiar wit	to the provisions of Sections 617,056 ed agent, or both, in the State of Fich, and accept the obligations of, Se	orida. Such change was author	ized by the corpora	ned corporal ation's board	ion submits this statement for the purp of directors. I hereby accept the appo	oose of changing intment as registe	its registered offi ered agent. I am
SIGNATURE _	Signature, typed or printed name of registered age	ent and title if applicable. (*)	NOTE Registered Agent s	gnature required v		DATE	
2.	OFFICERS A	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFI	CERS AND DIRE	CTORS IN 12
					ADDITIONS/CHANGES TO OFFI	OLI 10 7 II 4D DI IE	<del></del>
ILE	VD	DELETE	1.1 TITLE	D	ADDITIONS/CHANGES TO OFFI	Char	<del> </del>
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SIGNATURE: Sidnature and type of printed name of Bidning Officer or Director Une / Schuster 2-21-96

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