

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 # **746671** (7)

1. Corporation Name
BENT TREE GARDENS WEST CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business: **9990 PINEAPPLE TREE DR BOYNTON BCH FL 33436**
Mailing Address: **9990 PINEAPPLE TREE DR BOYNTON BCH FL 33436**

3. Date Incorporated or Qualified: **04/09/1979**
3a. Date of Last Report: **02/01/1995**

| | | | | | | | | | |
|----|--------------------------------|----|---------------------|----|--|---------------------------------------|---------|----|---|
| 21 | 2. Principal Place of Business | 26 | 2a. Mailing Address | 4. | FBI Number 59-2152177 | Applied For | | | |
| 22 | Suite, Apt. #, etc. | 27 | Suite, Apt. #, etc. | 5. | Certificate of Status Desired <input type="checkbox"/> | \$8.75 Additional Fee Required | | | |
| 23 | City & State | 28 | City & State | 6. | Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> | \$5.00 May Be Added to Fees | | | |
| 24 | Zip | 25 | Country | 29 | Zip | 30 | Country | 8. | This corporation has liability for intangible tax under s. 199.032, Florida Statutes <input type="checkbox"/> Yes <input type="checkbox"/> No |

9. Name and Address of Current Registered Agent
**SEYMOUR LEVY
9990 PINEAPPLE TREE DR
BOYNTON BCH FL 33436**

10. Name and Address of New Registered Agent
81 Name: **LEONARD Heller**
82 Street Address (P.O. Box Number is Not Acceptable): **9930-2 Pineapple Tree Dr.**
83
84 City: **Boynton Bch., FL** 85 Zip Code: **33436**

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: *Leonard Heller* **Leonard Heller** DATE: **4/5/96**

| 12. OFFICERS AND DIRECTORS | | 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 | |
|----------------------------|---|---|---|
| TITLE | PD <input type="checkbox"/> DELETE | 1.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | ARTHUR ZACCRIA | 1.2 NAME | |
| STREET ADDRESS | 9990 PINEAPPLE TREE DR | 1.3 STREET ADDRESS | |
| CITY-ST-ZIP | BOYNTON BCH, FL 00000 33436 | 1.4 CITY-ST-ZIP | |
| TITLE | VD <input type="checkbox"/> DELETE | 2.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | MILDRED TANTIMONACO | 2.2 NAME | |
| STREET ADDRESS | 9990 PINEAPPLE TREE DR | 2.3 STREET ADDRESS | |
| CITY-ST-ZIP | BOYNTON BCH, FL 00000 33436 | 2.4 CITY-ST-ZIP | |
| TITLE | T <input type="checkbox"/> DELETE | 3.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | HELLER, LEONARD | 3.2 NAME | |
| STREET ADDRESS | 9990 PINEAPPLE TREE DR | 3.3 STREET ADDRESS | |
| CITY-ST-ZIP | BOYNTON BCH FL | 3.4 CITY-ST-ZIP | |
| TITLE | S <input type="checkbox"/> DELETE | 4.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | KIRBY, JOHN | 4.2 NAME | |
| STREET ADDRESS | 9990 PINEAPPLE TREE DR | 4.3 STREET ADDRESS | |
| CITY-ST-ZIP | BOYNTON BEACH FL | 4.4 CITY-ST-ZIP | |
| TITLE | D <input type="checkbox"/> DELETE | 5.1 TITLE | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| NAME | LIONEL GNANASEELAN | 5.2 NAME | |
| STREET ADDRESS | 9990 PINEAPPLE TREE DR. | 5.3 STREET ADDRESS | |
| CITY-ST-ZIP | BOYNTON BCH. FL 33436 | 5.4 CITY-ST-ZIP | |
| TITLE | D <input checked="" type="checkbox"/> DELETE | 6.1 TITLE | <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition |
| NAME | ESPADA, NELSON | 6.2 NAME | Louise Rulli |
| STREET ADDRESS | 9990 PINEAPPLE TREE DR. | 6.3 STREET ADDRESS | 9960-4 Pineapple Tree Dr. |
| CITY-ST-ZIP | BOYNTON BEACH FL | 6.4 CITY-ST-ZIP | Boynton Bch., FL 33436 |

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: *Leonard Heller* **Leonard Heller** Date: **4-5-96** Daytime Phone #: **407-736-6005**

CR2E037 (12/95)