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## Jun 25 1998 8:00am NONPROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Secretary of State Sandra B. Mortham ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 THE CONTYNED CONDOMINION ASSOCIATION, INC. DOCUMENT # 1. Corporation Name Principal Place of Business Mailing Address 111 LAKE AVE, #9 III LAKE AVE CAKE WERTH, FL 33460-6905 3. Date Incorporated or Qualified CAKE WORTH, PL 33460 Applied For Not Applicable 2. Principal Place of Business 2a, Mailing Address \$8.75 Additional 5. Certificate of Status Desired 26 21 Fee Required Suite, Apt. #, etc. Suite, Apl #, etc 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution 22 Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? 23 Country Zip Zip 8. This corporation owes or has paid the current year Intangible Yes 30 24 25 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 MANNARD VICTORIA Street Address (P.O. Box Number's Not Acceptable) III LAKE AVE, DWIT 3 MILAKE AVE, UNITHI LAKE WORTH, IL 33460 82 83 11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Florida Statules, 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 Statules. and DENN'S HEADEY TREASURER OF A REPORT OF A REAL STREET STREET STREET CR2E037 (10/97) OFFICERS AND DIRECTORS 12. 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 PRESIDENT [P ■ DELETE Change TITLE 1.1 TITLE VICTURIA MAYNARD NAME 1.2 NAME IN LAKE AUC, #1 13 STREET ADDRESS STREET ADDRESS CITY-ST-ZIP AKC WURTH, FL 1.4 CITY - ST - ZIP DELETE TITLE 2.1 THLE Change Addition VICE-ACSIDENT ( NAME 22 NAME LENCE STANISCO ITLAKE ANG #6 LAKE WORTH, FL 33460 STREET ADDRESS 2.3 STREET ADDRESS CITY-ST-ZIP 2 4 CITY - ST-ZIP RECORDING SCERETARY (5) STEPHASIC HODOVAN(D) DELETE Change ☐ Addition NAME 3.2 NAME MILAKE AVE, #8 STREET ADDRESS 3 3 STREET ADDRESS AKE WURTH, FL CITY-ST-ZIP 33460 34 CITY-ST-ZIP TIPLE TREASURED CT DELETE 4 1 TITLE 4. 2 NAME 4.3 STREET ADDRESS AKC WOATH FL 33460-394 CITY - ST - ZIP 4.4 C/TY - ST - 2/P DELFTE TITLE 5.1 TITLE NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP ☐ DELETE TITLE 6.1 TITLE Change Addition 9000025730.[9 NAME 62 NAME -06/26/88--01014--012 STREET ADDRESS 6.3 STREET ADDRESS \*\*\*70.00 64 CITY-ST-ZIP 14. Thereby 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 eath; 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

**FILED** 

(561) 995-5571