## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 751180

(1)

Apr 09 1998 8:00am					
Secretary of State					

EII ED

GALT OCEAN TERRACE CONDOMINIUM ASSOCIATION, INC.						
Principal Plac	e of Business	Mailing Address			4 TERITI SADDI BIBA KODU JIDON YETIK ADDI DIDIK DADIK BIBIN BIDIN BIBIK DIDIK DIDIK	
3031 NORTH O FT. LAUDERDA US		P O BOX 452347 Sunrise FL 33345 US			3. Date Incorporated or Qualified  02/21/1980  4. FEI Number Applied For  59-2010948 Not Applicable	
2. Principal P	lace of Business	2a. Mailing Address			5. Certificate of Status Desired \$8.75 Additional	
Sulte, Apt.	#, etc.	Suite, Apt. #, etc.			Fee Required  6. Election Campaign Financing \$5.00 May Be	
22 City & Stat	Δ	City & State			Trust Fund Contribution Added to Fees	
23		28			7. Is this nonprofit corporation a homeowners association?  Yes No	
Zip Country		2ip Country 29 30		У	This corporation owes or has paid the current year Intangible     Personal Property Tax due June 30.    Yes    No	
24	9. Name and Address of Curre		30		Personal Property Tax due June 30. Li Yes Li No 10. Name and Address of New Registered Agent	
			8-	Name		
CREST	PROPERTY MGMT		82	Street	Address (P.O. Box Number is Not Acceptable)	
	ATUS ROAD #156				Tradition (1 io. Box traines in that to be placed)	
SUNRIS	E FL 33351		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 title if applicable.  (NOTE: Registered Agent signature required when reinstating).  DATE						
12.		D DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD	DELETE	1.1 TITLE		Change Addition	
NAME	ABERMAN, MARK		1.2 NAME			
STREET ADDRESS	3031 N OCEAN BLVD., #170 FT LAUDERDALE FL	1		T ADDRESS		
CITY-ST-ZIP	SD SD	☐ DELETE	1.4 CITY- 2.1 TITLE	SI-ZIP	☐ Change ☐ Addition	
NAME	COPPOLA, GERALDINE		2.2 NAME			
STREET ADDRESS	3031 N OCEAN BLVD 708		2.3 STREE	T ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL		2. 4 City	ST-ZIP		
TITLE	D DODGE PARTY	☐ DELETE	3.1 TITLE		Change Addition	
NAME	GROSS, ROBERT		3.2 NAME			
STREET ADDRESS	3031 N OCEAN BLVD 1407 FT LAUDERDALE FL		3.3 STREE	T ADDRESS		
CITY-ST-ZIP TITLE	D D	DELETE	4.1 TITLE	- 51 - ZIP	Change Addition	
NAME	JORGENS, JUTTA		4. 2 NAM			
STREET ADDRESS	3031 N OCEAN BLVDL 1805		4.3 STREE	T ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL		4.4 CITY-	ST-ZIP		
TITLE	_VP	DELETE	5.1 TITLE		Change Addition	
NAME	VALLO, JOSEPH A		5.2 NAME			
STREET ADDRESS	3031 N OCEAN BLVD., #140	5		T ADDRESS	1.	
CFTY-ST-ZIP	FT-LAUDERDALE FL	☐ DELETE	5.4 CITY- 6.1 TITLE	ST-ZIP	Change   Addition	
NAME			6.2 NAME		Suzannes LEROUX Delange LI Addition	
STREET ADDRESS				T ADDRESS	3031 N Ocean Blud 1807	
CITY-ST-ZIP			6.4 CITY-		7t. Ludendale 71 33808	
14. Thereby o	certify that the information supplied v	ith this filing does not qualify for	r the exem	ption state	ed 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.						