FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998

Principal Place of Business

WEST PALM BEACH FL 33414

2. Principal Place of Business

Suite, Apt. #, etc.

SIGNATURE:

City & State

504 PINTO CIR.

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FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 752115

(6)

504 PINTO CIR. WEST PALM BEACH FL 33414

Mailing Address

2a. Mailing Address

City & State

Suite, Apt. #, etc.

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WORTH AVENUE PROPERTY OWNERS ASSOCIATION, INC.

FILED Jan 28 1998 8:00am Secretary of State

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Yes

7. Is this nonprofit corporation a homeowners association?

Applied For

\$8.75 Additional

Fee Required

\$5.00 May Be

Added to Fees

Not Applicable

04/22/1980

65-0031375

5. Certificate of Status Desired

6. Election Campaign Financing

Trust Fund Contribution

Zip	Country	Zip		untry	,	8. This corporation owes	or has paid the cur	rent year	r Intangible	
24	25	29	30			Personal Property Tax	due June 30.	Yes	□ No	
Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent										
				81	Name					
BRORFR	G, GUSTAVO T., JR.			82	Ctroot Adds	and (C.O. Bay Number to Mar	Anna-table)			
	RTH AVENUE			82	Sueer Addi	ess (P.O. Box Number is Not	Acceptable)			
	EACH FL 33480			83			·			
LYDM Of	_ACITIC 33460									
				84	City		FL	85 Z	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 age				nt signature require	ed when reinstating)	DATE TO OFFICE AND			
12.	OFFICERS AN		13.			ADDITIONS/CHANGES	TO UFFICERS AND	- 1		
TITLE	PD	☐ DELETI						∐ Chan	ge L Addition	
NAME	KASSATLY, EDWARD		1.2 N	IAME	1				Ī	
STREET ADDRESS	250 WORTH AVE		1.3 9	TREET	ADDRESS					
CITY-ST-ZIP	PALM BEACH FL			ITY-S	T-ZIP					
TITLE	SD	☐ DELETI	2.1 T	TLE				Chang	ge 🔲 Addition (
NAME	SMYTHE, MARTHA		2.2 N	IAME						
STREET ADDRESS	504 PINTO CIR		2.3 S	TREET.	ADDRESS					
CITY-ST-ZIP	WELLINGTON FL		2.40	CITY-S	ST-ZIP				ĺ	
TITLE	D	☐ DELETE				······································		☐ Chang	ge Addition	
NAME	MAUS, JOHN		3.2 N	AME					ì	
STREET ADDRESS	312 WORTH AVE		3.3 S	TREET .	ADDRESS					
CITY-ST-ZIP	PALM BEACH FL		34.0	HTY-S	T-71P					
TITLE		DELETE				·····		Chang	ge Addition	
NAME		_	4 2 1	MAME	1			_	_	
STREET ADDRESS					ADORESS					
CITY-ST-ZIP				ITY-ST						
TITLE		DELETE			1-21			Chanc	ge Addition	
NAME			5.2 N							
					ADDRESS					
STREET ADDRESS									ļ	
CITY-ST-ZIP		DELETE		iTY-ST	r-zip			Chang	ie Addition	
TITLE		☐ DETER							ie T Annymini	
NAME			6.2 N						İ	
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP		a a l. en		TY-ST		D 440 00(0)(0) (7)				
14. I hereby 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 suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under path; 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.										
		<i>(1)</i>			<i>(1)</i>				I	