

FLORIDA DEPARTMENT OF STATE

## Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## DOCUMENT # **75446**9

1. Corporation Name

NORTH VILLAGE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business 1 TURTLE BEACH RD. VERO BEACH FL 32963

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

21

Mailing Address

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

27

28

1 TURTLE BEACH RD. VERO BEACH FL 32963

## Apr 23, 1999 8:00 am Secretary of State

04-23-1999 90228 001 \*\*\*\*61.25



3. Date Incorporated or Qualifed 10/03/1980

5. Certifcate of Status Desired

4. FEI Number 59-2344393

9. Name and Address of Current Registered Agent  9. Name and Address of Current Registered Agent  10. Name and Address of New Registered Agent  11. Name  82. Street Address (P.O. Box Number is Not Acceptable)  11. TURTLE BEACH RD.  VERO BEACH FL 32963  83. B4 City	Zip `	Country	Zip		Country		6. Ę∣	lection Campaign Fin	ancing r	7	\$5.00	May Be		
ROSE, MICHAEL L 1 TURTLE BEACH RD. VERNO BEACH FL 32983  84 City FL 85 Zip Code  11. Pursuant to the provisions of Sections 617 0502 and 617 1508. Florida Statutes authors above named corporation submits this statement for the purpose of changing its register of agent, or both, in the State of Florida. Such changes authors above named corporation submits this statement for the purpose of changing its register agent. In remillar with, and accept the objection 617 0503, Florida Statutes.  SIGNATURE  12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1.1 TITLE  12. NAME 1.1 TITLE  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 1.1 TITLE  12. NAME 1.1 TITLE  13. NAME 1.1 TITLE  14. CITY STEAD OAK DR., #722  14. CITY STEAD OAK DR., #722  15. STREET ADDRESS 1.1 TITLE  15. TITLE 1.1 TITLE 1.1 TITLE  15. TITLE 1.1 TITLE 1	24		29	30					n			to Fees		
ROSE, MICHAEL L 1 TURTLE BEACH RD. VERO BEACH FL 32963  82 Street Address (P.O. Box Number is Not Acceptable)  83 BA City FL 85 Zip Code 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, and familiar with, and accept the obligations of, Section 617, 2605, Piorida Statutes, the above-named corporation submits this statement for the purpose of changing its register of the composition of the composition of the composition's board of directors. I hereby accept the appointment as registered agent, and familiar with, and accept the obligations of, Section 617, 2605, Piorida Statutes, the above-named corporation's board of directors. I hereby accept the appointment as registered agent, and accept the obligations of, Section 617, 2605, Piorida Statutes, and the composition of the purpose of changing its register of the composition of the corporation's board of directors. I hereby accept the purpose of changing its register of the corporation's board of directors. I hereby accept the obligations of, Section 617, 2605, Piorida Statutes, the above-named corporation submits this statement for the purpose of changing its register accept the corporation's board of directors. I hereby accept the obligations as submitted and the proposed accept the purpose of changing its register accept the corporation's board of directors. I hereby accept the proposed accept the purpose of changing its register accept the corporation's board of directors. I hereby accept the corporation's board of directors. I hereby accept the purpose of changing its register accept the corporation's board of directors. I hereby accept the purpose of changing its register accept the corporation's board of directors. I hereby accept the purpose of changing its register accept the corporation of directors. I hereby accept the corporation of directors. I hereby accept the corporation of directors. I hereby accept the corporation	Name and Address of Current Registered Agent													
1 TURTLE BEACH RD. VERO BEACH FL 32963  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 register 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, are familiar with, and accept the obligations of, Section 617.0502, Florida Statutes.  SIGNATURE  SIGNATURE  Signature, types or printed name of agginateria deport and size if appointment as registered agent, are familiar deportance as registered agent, and accept the obligations of, Section 617.0502, Florida Statutes.  NOTE:  12. OFFICERS AND DIRECTORS II  13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS II  14. TITLE  15. OFFICERS AND DIRECTORS II  15. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS II  16. TITLE  17. SEA OAK DR., #722  15. STREET ADDRESS  17. SEA OAK DR., #716  15. STREET ADDRESS  17. SEA OAK DR., #716  15. STREET ADDRESS  15. STREET A					81	Name								
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SIGNATURE   Signature, typed or printed name of registered agent and bits if applicable.   (NOTE: Registered Agent signature required when revisitating)   DATE	office or n	egistered agent, or both, in the State o	of Florida. Such chanc	ge was author	IZOO DY	the corpo	oration's boar	d of directors. I hereb	y accept th	e appoint	ment as re	gistered		
Signalura, hyber or printed name of registered agent and tile if registered agent and tile if registered agent are required when reinstating)   DATE	agent. I a	m ramiliar with, and accept the obligati	ions or, Section 617.0	iouo, Fiorida d	olailules	•								
12.	SIGNATURE	Signature, typed by printed game of registered egent	and title if applicable.	(NOTE: Regist	tered Agen	t signature re	equired when reins	stating)		DATE		<del></del>		
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VERO BEACH, FL. 32963	STREET ADDRESS	INCELI ADDRESS				VERO BEACH, FL. 32963			32963					
CITY-ST-ZIP  6.4 CITY-ST-ZIP  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										41	. 45 a4 4b -	info-mation.		

indicated on this annual report or supplier manual 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 of 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, with all other like empowered.

SIGNATURE:

April 16, 1999.

(561)231-1666

Davime Phone #

Applied For

\$8.75 Additional

Fee Required

Not Applicable