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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT #

1. Corporation Name

(6)

FRENC	H QUARTER CONDOMINIU	JM ASSOCIATION, INC	•						
Principal Plac	e of Business	Mailing Address			1 1104/11 101	At Metri Gillin 18189 1961 El)	1811 BIBLI ØFI	DER WIN ER (1991)
6266 1ST AVE : 7217 GULF BLV ST. PETE FL 33	/D.	7217 GULF BLVD 7217 GULF BLVD. SAINT PETE BEACH FL 33 US	9706-1964		3. Date Incorp	prated or Qualified	3a. Date	of Last Re	eport
US		08			10/30/			/18/199	
	Place of Business	2a. Mailing Address		·····	4. FEI Number				plied For
Suite, Apt	# atc	Suite, Apt. #, etc.			59-207	3042		\$8.75 /	t Applicable
22	π, σισ	27			5. Certificate o	f Status Desired		Fee Re	
City & Stat	le	City & State		***************************************	6. Election Car	npaign Financing		\$5.00	May Be
23		28	.,		Trust Fund (Contribution		Added t	
Zip	Country	Zip	Country	y		tion has liability for i	ntangible ta Yes 🏻		199.032,
24	25 9. Name and Address of Curre	29 nt Registered Agent	30		Fiorida State	лев Address of New Re			
			81	Name					
SCHNOO	OR, FRANK		82	Street A	ddress (P.O. Box Num	her is Not Acceptab	ا <u>م</u> ا		-,
	JLF BLVD				adiods (F.O. Don Hall	201 12 140(71000ptas			
	JLF BLVD.		63]					
ST. PETI	E BEACH FL 33706		84	City				85 Zip (Code
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office or r	to the provisions of Sections 617.05 registered agent, or both, in the Stat am familiar with, and accept the oblig	e of Florida Such change was	authorized b	y the corpo	oration's board of direc	s statement for the pators. I hereby accep	t the appoir	nanging id ntment as	registered
agent. La	am familiar with, and accept the oblid	rations of Caction 617 0502 El							
		gations of, Section 017.0000, 11	ionua Statute	ъ.	•				
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14. I do 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 supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under or 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 changes or on an attachment with an agricies.

SIGNATURE:

FILED

May 13 1997 8:00am

Secretary of State