## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

**FILED** 

May 16 1997 8:00am

Secretary of State

## Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #
1. Corporation Name

CITY-ST-ZIP

756811

(6)

NEW MARK GLEN TENANTS ASSOCIATION, INC.

Principal Plac	e of Business	Mailing Address			101
6800 NW 39 AVENUE RT. 2 BOX 623 158		6800 NW 39 AVENUE RT. 2 BOX 823 158 COCONUT CREEK. FL033073 33073-2036			
COCONUT CREEK, FLQ33073 33073				3. Date incorporated or Qualified	3a. Date of Last Report
				03/17/1981	05/01/1996
2. Principal Place of Business		2a. Mailing Address		4. FEI Number 59-2145878	Applied For
Suite, Apt. #, etc.		Suite, Apt. #, etc.		39-2 143070	Not Applicable  \$8.75 Additional
22		27		5. Certificate of Status Desired	Fee Required
City & State		City & State		6. Election Campaign Financing	<b>\$5.00</b> May Be
Zip Country		Zip Country		Trust Fund Contribution	Added to Fees
24 Zip	25 Country	29 30		8. This corporation has liability for i	intangible tax under s. 199.032,
	9, Name and Address of Curren		<u> </u>	10. Name and Address of New Re	
Name Name VIRGINIA DU BOIS					
LAMBE, PATRICK J				Address (P.O. Box Number is Not Acceptab	ole)
6800 NW 39 AVE LOT 264			83	OONW 39 AVE	LOT 15-8
RT 2 HBOX 158 COCONUT CREEK FL 33073			RT 2 H BOX 158		
			84 City	NUT CREEK	FL 33073
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.					
agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.					
SIGNATURE	VIRGINIA DUBOI Signature, typed or printed name of registered age		Du Bo	required when reinstaling)	/4/97
12.		D DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12
TITLE	P	<b>⊠</b> DELETE	1.1 TITLE	P	Change Addition
NAME	BACHMAN, MARK-		1.2 NAME	WOODBURY JOAN	/
STREET ADDRESS	6800 NW 39 AVE LOT 428 COCONUT CREEK FL			6800 NW 39 AVE L	.07 148
CITY-ST-2#P	VPD	DELETE	1.4 CITY - ST - ZIP 2.1 TITLE	LOCONUT CREEK, F	Change Addition
NAME	BRADEN, JEEF	<b>4</b>	2.2 NAME	BISHOP RAY	
STREET ADDRESS	6800 NW 39 AVE LOT 368		2.3 STREET ADDRESS	6500 NW 39 AVE 10	OT 491
CITY - ST - ZIP	COCONUT CREEK FL		2. 4 CITY-ST-ZIP	COCONUT CREEK F	· L
TITLE	VPD BILL	₩ DELETE	3.1 TITLE	VPD	Change Addition
NAME STREET ADDRESS	SHUPE, BILL 6800 NW 39 AVE LOT 105		3.2 NAME 3.3 STREET ADDRESS	BRUSEWITZ LAU 6800 NW 39 AVE	7.7 498
City-ST-ZIP	COCONUT CREEK FL		3.4. CITY - ST - ZIP	COCONUTCREEK 1	=2
TITLE	\$	DELETE	4.1 TITLE	S RA	Change Addition
NAME	_MCEACHERON, SUE		4. 2 NAME	DUBOIS VIRGINI	A
STREET ADDRESS	6800 NW 39 AVE LOT 86			6800 NW 39 AVE	
CITY - ST - ZIP TITLE	COCONUT CREEK FL	<b>₩</b> DELETE	E 4 TITLE	COCONUT CREEK,	M Channe   Addition
NAME	RILEY, KIM	M DELETE	5.2 NAME	CARTER RUBY 6800 NW 39 AVE	MENT CHANGE THE LANGESTON
STREET ADDRESS	6800 NW 39 AVE LOT 436		5.3'STREET ADDRESS	6800 NW 39 AVE	201240
CITY-ST-ZIP	COCONUT CREEK FL		5.4 CITY-ST-ZIP	COCONUT CREEK,	FL
TITLE		☐ DELETE	6.1 TITLE		Change Addition
NAME			6.2 NAME		
STREET ADDRESS		ļ	6.3 STREET ADDRESS		

6.4 CITY-ST-ZIP

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 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 antischment with an address.