FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1998 DOCUMENT #

GOLDEN TWIN HOMES CONDOMINIUM NO. 20 ASSOCIATION

, INC.			i baan arah bina anan arah arah isini arah birah birah arah arah arah arah arah arah arah							
Principal Place of Business Mailing Address					I MADANA KADAN ZANIN DINAS INGIN DASSI DIGI DIGIL DIBI	t Blant Aidil Bidil Bidil (Adi				
19 CLOUGH REDEDHAM MA 0		19 CLOUGH RD DEDHAM MA 02026			3. Date Incorporated or Qualified 03/23/1981					
					4. FEI Number NOT APPLICABLE	Applied For Not Applicable				
2. Principal Place of Business 2a. Mailing Address 21					5. Certificate of Status Desired	\$8.75 Additional Fee Required				
Suite, Apt. #, etc Suite, Apt. #, etc. 22 8 NOTTINGHAM WAY 27 8 NOTTINGHAM		an a	VAZ	Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees					
City & State City & State 23 8 TONG HAM, IMA. 28 8 TONG HAM, IMA.			MP.			7. Is this nonprofit corporation a homeowners association? Yes No				
		Country		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No						
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent					
DUADTE	LEONOD		81	Name						
DUARTE, LEONOR 1432 S.W. 104 AVE. MIAMI FL 33174			82	Street	ress (P.O. Box Number is Not Acceptable)					
			63							
			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. OFFICERS AND DIRECTORS 13.					ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12					
TITLE	PD DELETE 1.1 TI		1.1 TITLE			Change Addition				

SIGNATURE						
12.	Signature, typed or printed name of registered agent and title If appl OFFICERS AND DIRECTOR	···		<u> </u>	DATE	0.01.45
		··-	13.	ADDITIONS/CHANGES TO OFFICER		
TITLE	PD	☐ DELETE	1.1 TITLE		Change	Addition
NAME	DUARTE, LEONOR		1.2 NAME			
STREET ADDRESS	1432 S.W. 104TH AVE.		1.3 STREET ADDRESS			
CITY-ST-ZIP	_MIAMI, FL 0		1.4 CITY - ST - ZIP		_	
TITLE	0	DELETE	2.1 TITLE	D	Change	Addition
NAME	SOTOMAYOR, BLANCA STELLA		2.2 NAME	SOTOMATUR, BLANCA STOCKA		
STREET ADDRESS	19 CLOUGH ROAD		2.3 STREET ADDRESS	SOTOMATON, BLANCA STOCKA 8 NOTTINGHAM WAY STONGHAM. MA 02180	4	
CITY-ST-ZIP	DEDHAM MA		2.4 CITY - ST - ZIP	STONGHAM. MA 02180		
TITLE	D	DELETE	3.1 TITLE		☐ Change	Addition
NAME	vasquez, Helen		3.2 NAME			
STREET ADDRESS	33 FORTE AVEN		3.3 STREET ADDRESS			
CITY-ST-ZIP	MEDORD NY		3.4. CITY-ST-ZIP			
TITLE		☐ DELETE	4.1 TITLE		☐ Change	Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS			
CITY-ST-ZIP			4.4 CITY - ST - ZIP			
TITLE		☐ DELETÉ	5.1 TITLE		Change	Addition
NAME			5.2 NAME			
STREET ADDRESS			5.3 STREET ADDRESS			
CITY-ST-ZIP			5.4 CITY - ST - ZIP			
TITLE		☐ DELETE	6.1 TITLE		☐ Change	☐ Addition
NAME			6.2 NAME			
STREET ADDRESS			63 STREET ADDRESS			
l l						I.

64 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 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.

SIGNATURE:

Dlanca Stella Solmora 4/1/88 (281)279-2202

FILED

Apr 30 1998 8:00am

Secretary of State