

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 757728 (1)

1. Corporation Name

THE COURTYARD CONDOMINIUM ASSOCIATION, INC. OF R  
IVIERA BEACH

Principal Place of Business

1100 SURF RD  
#214  
SINGER ISLAND FL 33404

Mailing Address

1100 SURF RD  
#214  
SINGER ISLAND FL 33404



3. Date Incorporated or Qualified  
04/24/1981

3a. Date of Last Report  
05/01/1995

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

4. FEI Number

59-2380893

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CHISHMARK, GEORGE  
CHISHMARK & COMPANY  
901 NORTHPOINT PKWY 102  
WEST PALM BEACH FL 33407

*delete*

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

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 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

*Diane C. Halperin*

4/22/96

Signature, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D  
NAME CHISHMARK, GEORGE E  
STREET ADDRESS 901 NORTHPOINT PKWY 102  
CITY-ST-ZIP WEST PALM BEACH FL ☒ DELETE

TITLE PD  
NAME ROSENKRANZ, ROSEAM J  
STREET ADDRESS 1100 SURF RD., #206  
CITY-ST-ZIP SINGER ISLD FL ☒ DELETE

TITLE SD  
NAME ARCIERI, JOY  
STREET ADDRESS 1100 SURF RD 109  
CITY-ST-ZIP SINGER ISLAND FL ☒ DELETE

TITLE TD  
NAME FEDERICO, ELAINE  
STREET ADDRESS 1100 SURF RD 205  
CITY-ST-ZIP SINGER ISLAND FL ☐ DELETE

TITLE PD  
NAME Halperin, Diane C  
STREET ADDRESS 1100 Surf Rd 106  
CITY-ST-ZIP Singer Island, FL ☐ DELETE

TITLE SD  
NAME Gilligan, K. Phyllis  
STREET ADDRESS 1100 Surf Rd #102  
CITY-ST-ZIP Singer Island, FL ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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: *Diane C. Halperin*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/22/96 (407) 848-7672

Date

Daytime Phone #

CR2E037 (12/95)