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NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1996

DOCUMENT #

761927

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NEPTUNE HOLLYWOOD BEACH CLUB CONDOMINIUM ASSOCIATION, INC.

FILED Apr 22 1996 8:00 am Secretary of State



Principal Place of Business		Mailing Address		f 1000til 800ta 81561 11818 18110 11811 1881 ateit 81811 81811 81811 81811 1881			
2012 N. SURF ROAD HOLLYWOOD FL 33019		2012 N. SURF ROAD HOLLYWOOD FL 33019					
					3. Date Incorporated or Qualified 02/11/1982	3a. Date of La 04/18	ast Report 3/1995
Princ pal Plac	ce of Business	2a. Mailing Address			4. FEI Number		Applied For
		26			59-2256165		Not Applicable
Suite, Apt. #,	, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	1 1 7	75 Additional ee Required
City & State		City & State	 		6. Election Campaign Financing	 	.00 May Be
Oily a State		28			Trust Fund Contribution	7 -	ided to Fees
Zip	Country	Zip	Country	/	8. This corporation has liability for in	ntangible tax unde	rs. 199.032,
	25	29	30		Florida Statutes	Yes KANo	
	9. Name and Address of Curre	nt Registered Agent		,	10. Name and Address of New Re	egistered Agent	
			81	Name			
	OFF, GARY		82	82 Street Address (P.O. Box Number is Not Acceptable)			
	,POLIAKOFF, & STREITFELD		83				
	irling RD.						
FT.LAUD	ERDALE FL 33310		84	City		FL 85	Zip Code
ramiliar with	h, and accept the obligations of, Sec		i J				
GNATURE	Signature, typed or printed name of registered age:		IOTE: Registered Age	ent signature réquire	ed when reinstating?	DATE	
GNATURE _	Signature, typed or printed name of registered age			ent signature require	ed when reinstating! ADDITIONS/CHANGES 10 OFFI		CTORS IN 12
GNATURE	Signature, typed or printed name of registered age	nt and title if applicable (N	IOTE: Registered Age				
GNATURE	Signature, typed or printed name of registered age	nciand title if applicable (N ND DIRECTORS	IOTE: Registered Age			CERS AND DIREC	
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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, 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

ANATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/17/86

Daytime Phone #