


FILE NOW: FILING FEE IS \$61.25

FILED

Feb 17 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **764548** (4)

1. Corporation Name

RAVENSWOOD GARDENS CIVIC ASSOCIATION, INCORPORATED

Principal Place of Business

Mailing Address

2291 SW 51 CT
FT LAUDERDALE FL 33312
US

2351 S.W. 51ST COURT
FT LAUDERDALE FL 33312

2. Principal Place of Business

2a. Mailing Address

21 **2180 SW 51ST COURT**

26 **2180 SW 51ST COURT**

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State

23 **FT. LAUDERDALE FL.**

28 **FT. LAUDERDALE FL.**

24 Zip

Country

29 Zip

Country

24 **33312**

25 **U.S.A**

29 **33312**

30 **USA**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

NUNEZ, ROSE A
2291 SW 51 CT
FT LAUDERDALE FL 33312

81 Name **CLAIRE E. DION**

82 Street Address (P.O. Box Number is Not Acceptable)
2180 SW 51ST COURT

83 City

84 **FT. LAUDERDALE FL**

85 Zip Code
33312

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

Claire E. Dion

CLAIRE E DION, TREASURER

2-6-98

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

(NOTE: Registered Agent signature required when reappointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	P	<input type="checkbox"/> DELETE
NAME	KETTERMAN, JAMES	
STREET ADDRESS	2200 SW 51 CT	
CITY-ST-ZIP	FT LAUDERDALE FL	

1.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	PIERRE FOUCAULT	
1.3 STREET ADDRESS	2340 SW 51ST PLACE	
1.4 CITY-ST-ZIP	FT. LAUDERDALE FL. 33312	

TITLE	V	<input checked="" type="checkbox"/> DELETE
NAME	DION, CLAIRE	
STREET ADDRESS	2180 SW 51 CT	
CITY-ST-ZIP	FT. LAUDERDALE FL	

2.1 TITLE	V	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	REAL CHATEAUNEUF	
2.3 STREET ADDRESS	2241 SW 51ST COURT	
2.4 CITY-ST-ZIP	FT LAUDERDALE FL 33312	

TITLE	S	<input type="checkbox"/> DELETE
NAME	THERIAULT, DONAT	
STREET ADDRESS	2270 SW 51 CT	
CITY-ST-ZIP	FT LAUDERDALE FL	

3.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	JOHN TODD	
3.3 STREET ADDRESS	2270 SW 51ST PLACE	
3.4 CITY-ST-ZIP	FT. LAUDERDALE FL. 33312	

TITLE	T	<input checked="" type="checkbox"/> DELETE
NAME	MORDELS, JOY	
STREET ADDRESS	2291 SW 51 CT	
CITY-ST-ZIP	FT. LAUDERDALE FL	

4.1 TITLE	T	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	CLAIRE E DION	
4.3 STREET ADDRESS	2180 SW 51ST COURT	
4.4 CITY-ST-ZIP	FT. LAUDERDALE FL. 33312	

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	CHATEAUNEUF, REAL	
STREET ADDRESS	2241 SW 51 CT	
CITY-ST-ZIP	FT LAUDERDALE FL	

5.1 TITLE	D	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	ARTHUR OSBORNE	
5.3 STREET ADDRESS	2171 S.W. 51ST COURT	
5.4 CITY-ST-ZIP	FT. LAUDERDALE FL. 33312	

TITLE	D	<input type="checkbox"/> DELETE
NAME	RIVAS, PATRICIA	
STREET ADDRESS	5131 SW 23 TERR	
CITY-ST-ZIP	FT LAUDERDALE FL	

6.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	JOSEPH MINIK	
6.3 STREET ADDRESS	2160 SW 51ST COURT	
6.4 CITY-ST-ZIP	FT. LAUDERDALE FL. 33312	

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:

Claire E. Dion

Feb 6, 1998

954-
966-6653

CFR2E037 (10/97)