FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

May 06 1998 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998
DOCUMENT # 7

Principal Place of Rusiness

767706

(5)

Mailing Address

GOLDEN APPLIANCE PROTECTION PLAN, INC.

, ·	•			
C/O DOROTHY CHAFETZ C/O DOROTHY		3. Date Incorporated or Qualified		
172 LAKE MERYL DR	172 LAKE MERYL DR.		03/29/1983	
WEST PALM BEACH FL 33411	WEST PALM BEACH FL 33 US	1411	4. FEI Number	Applied For
103	03		59-2292014	Not Applicable
2. Principal Place of Business	2a. Malling Address			8.75 Additional
21 26			5. Certificate of Status Desired	Fee Required
Suite, Apt. #, etc. Suite, Apt. #, etc.			6. Election Campaign Financing	\$5.00 May Be
22 27				Added to Fees
City & State City & State			7. Is this nonprofit corporation a homeowners association?	
28 28			☐ Yes 🔼 No	
Zip Country	Zip	Country	- 1113 bol polation offos of has paid the delicate year intalligation	
2425	29	90 Personal Property Tax due June 30. Yes □ No □		
9. Name and Address of Current Registered Agent			10. Name and Address of New Registered Agent	
CHAFETZ, DOROTHY		81 Name	81 Name	
		82 Street Ad	82 Street Address (P.O. Box Number is Not Acceptable)	
172 LAKE MERYL DR				
WEST PALM BEACH FL 33411		83		
		84 City		15 Zip Code
		Jes City	FL i	Elp Code
11. Pursuant to the provisions of Sections 617,0502 and 617,1508, Fjorida Statutes, the above-named corporation submits this statement for the purpose of changing its registre				anging its registered
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 a	gent and title if applicable. (NOT	E: Registered Agent signature req	cuired when reinstating) DATE	
12. OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DI	
TITLE PD	☐ DELETE	1.1 TITLE		Change Addition
NAME ALTSHELER, GERTRUDE		1.2 NAME	SELMA MAPKOWITZ	or cl
STREET ADDRESS 154 LAKE MERYL DR., #150	MESS 154 LAKE MERYL DR., #158		140- 3/1 LAKE NAM	
CITY-ST-ZP W.PALM BEACH FL		1.4 CITY-ST-ZIP	IN PALM BEACH, FL	33411
TITLE VD	☐ DELETE	2.1 TITLE	, _	Change
HAME KARAS, JACK	KARAS, JACK 22 N			
STREET ADDRESS 125 LAKE OLIVE DR		2.3 STREET ADDRESS		
CITY-ST-ZIP W. PALM BEACH FL		2. 4 CITY-ST-ZIP		
TITLE TD	☐ DELETE	3.1 TITLE		Change Addition
NAME CHAFETZ, DOROTHY		3.2 NAME		
STREET ADDRESS 172 LAKE MERYL DR		3.3 STREET ADDRESS		
CITY-ST-ZIP W PALM BCH FL		3.4. CITY-ST-ZIP		
TITLE D	☐ DELETE	4.1 TITLE		Change Addition
NAME APPELSIS		4. 2 NAME		<u> </u>
STREET ADDRESS 131 LAKE OLIVE DR		4.3 STREET ADDRESS		
CITY-ST-ZIP W.PALM BEACH FL		4.4 CITY-ST-ZIP		
TITLE D	DELETE	5.1 TITLE		Change Addition
NAME BRINSKY, STAN		5.2 NAME		
STREET ADDRESS 114 LAKE OLIVE DR		5.3 STREET ADDRESS		1
CITY-ST-ZIP W.PALM BEACH FL		5.4 CITY-ST-ZIP		
TITLE D	DELETE	6.1 TITLE		Change Addition
NAME FISCHL, BENJAMIN		6.2 NAME		_
STREET ADDRESS 108 LAKE CONSTANCE DR		6.3 STREET ADDRESS		
CITY-ST-ZIP W.PALM BEACH FL		6.4 CITY-ST-ZIP		
			in Section 119.07(3)(i), Florida Statutes. I further certify	41-41-4

Gertales October