

FILE NOW: FILING FEE AFTER MAY 1 IS \$225.00

[illegible]

1995



DOCUMENT # F93000001835 (8)

MONTEREY VILLAGE APARTMENTS, INC.

APPROVED
AND
FILED

9-47

CLARK COUNTY, FLORIDA

CNA PLAZA
333 SOUTH WABASH AVENUE
CHICAGO IL 60685

CNA PLAZA
CORP TAX 335
CHICAGO IL 60685
US

3. Date of last inspection	3a. Date of last inspection
04/14/1993	05/01/1994

4. City/State	Applicant's
APPLIED FOR 36-3881000	Not Available

5. **Cost to ship to States (Required)** **\$8.75 Additional**
Fee Required

6. Low-Income Computer Hardware: Low-Cost Distribution:	\$5.00 May Be Added to Fees
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10-10-68

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

C T CORPORATION SYSTEM
1200 SOUTH PINE ISLAND ROAD
PLANTATION FL 33324

01	Name	
02	Street Address. If O.K. No Number is Not Acceptable	
03		
04	City	85 Zip Code

11. The report of the independent auditor is not to be prepared solely to substantiate the above-captioned representation against the statement for the purpose of changing its consistent effect in a subsequent report. It is to be the right of the company and its shareholders to have the company placed under the corporate control of directors. Company is not the appellant as respondent. The appellant is not the foundation of the company. The company is not the appellant.

[illegible]

PCD
LOWRY, DONALD M
CNA PLAZA
CHICAGO IL 60685

VD
MANN, ROBERT M
CNA PLAZA
CHICAGO IL 60685

SD
RIBIKAWSKIS, MARY A
CNA PLAZA
CHICAGO IL 60685

RYCROFT, DONALD C
CNA PLAZA
CHICAGO IL 60685

13. ALPHABETICALLY BY LAST NAME, FIRST NAME, LAST NAME, JR., SR., ETC.	
NAME	☐ Change ☐ Add
1. NAME	
2. Complete Address	
3. City, State, Zip	
4. Phone	☐ Change ☐ Add
5. NAME	
6. Complete Address	
7. City, State, Zip	
8. Phone	☐ Change ☐ Add
9. NAME	
10. Complete Address	
11. City, State, Zip	
12. Phone	☐ Change ☒ Add
NAME	
13. Complete Address	
14. City, State, Zip	
15. Phone	☐ Change ☐ Add

AS
WINIKENBACH, ROBERT D.
649 PULAZA
CHICAGO, IL 60655

SIGNATURE:

R D Winkul

SIGNATURE AND TYPED OR PRINTED NAME OF SENDING OFFICER OR DIRECTOR

4/25/95 (312) 622-7733