

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

CORPORATION  
ANNUAL REPORT  
1995



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

DOCUMENT # K17768

1. Corporation Name

Condo Monitor, Inc.

Principal Place of Business

Mailing Address

17673 Pittsburg Dr.  
Jupiter, FL 33458

same

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

3/4/88

3a. Date of Last Report

5/1/94

4. FEI Number

65-0039410

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional  
Fees Required

6. Election Campaign Financing

☐

\$5.00 May Be  
Added to Fees

6. This corporation has liability for intangible tax under S. 199.032,  
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

24

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

Teri L. DiClaudio  
17673 Pittsburg Dr.  
Jupiter, FL 33458

B1 Name

B2 Street Address (P.O. Box Number is Not Acceptable)

B3

B4 City

FL

85

Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0506, Florida Statutes.

SIGNATURE

*Teri L. DiClaudio*

(NOTE: Registered Agent signature required when representing)

4/30/95

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE  
NAME  
STREET ADDRESS  
CITY, ST, ZIP  
P/D  
Teri L. DiClaudio  
17673 Pittsburg Dr  
Jupiter, FL 33458

1. TITLE  
2. NAME  
3. STREET ADDRESS  
4. CITY, ST, ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY, ST, ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY, ST, ZIP

☐ Change ☐ Addition

300001492333  
-05/17/95--01172-012

\*\*\*200.00 \*\*\*200.00

TITLE  
NAME  
STREET ADDRESS  
CITY, ST, ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY, ST, ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY, ST, ZIP

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY, ST, ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY, ST, ZIP

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY, ST, ZIP

☐ Change ☐ Addition

TITLE  
NAME  
STREET ADDRESS  
CITY, ST, ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY, ST, ZIP

☐ Change ☐ Addition

DOA  
5-1-95

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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: Teri L. DiClaudio, *Teri L. DiClaudio*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/30/95

DATE

407-746-1418

Telephone Number