

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

95 MAR -7 PM 1:37

DOCUMENT # N00298 (2)

1. Corporation Name

BOARDWALK TOWNHOME ASSOCIATION, INC.

Principal Place of Business

Mailing Address

% TAGG MANAGEMENT & REALTY, INC.
3111 45TH ST SUITE 4
WEST PALM BEACH FL 33407
US

% TAGG MANAGEMENT & REALTY, INC.
3111 45TH ST SUITE 4
WEST PALM BEACH FL 33407
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

12/12/1983

3a. Date of Last Report

03/04/1994

4. FEI Number

59-2368118

Applied For

Not Applicable

5. Certificate of Status Desired

☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing

☐

\$5.00 May Be
Added to Fees

7. Nonprofit with IRS-501(c)(3)

☐

\$68.75 Supplemental
Fee Not Required

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

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

Country

28 Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TAGG MANAGEMENT & REALTY, INC.

~~3020 FAIRLANE FARMS~~

3111 45TH STREET SUITE 4

WEST PALM BEACH FL 33407

81 Name

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

83

84 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 607.0505, Florida Statutes.

SIGNATURE

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

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE	PD
NAME	SADDLER, HENRY
STREET ADDRESS	5340 E ELMHURST ROAD
CITY - ST - ZIP	WEST PALM BEACH FL 33417
TITLE	VPD
NAME	WOODS, EDWARD
STREET ADDRESS	5300B ELMHURST ROAD
CITY - ST - ZIP	WEST PALM BEACH FL 33417
TITLE	SD
NAME	ELDREDGE, DONNA
STREET ADDRESS	17076 ORANGE GROVE BLVD., #4
CITY - ST - ZIP	LOXAHATCHEE FL 33470
TITLE	TD
NAME	CHISHOLM, CONRAD
STREET ADDRESS	5320B ELMHURST ROAD
CITY - ST - ZIP	WEST PALM BEACH FL 33417
TITLE	ASTD
NAME	BRION, JACQUES
STREET ADDRESS	1880 N. CONGRESS AVENUE
CITY - ST - ZIP	WEST PALM BEACH FL 33401
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	☐ Change ☐ Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY - ST - ZIP	
2.1 TITLE	☐ Change ☐ Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY - ST - ZIP	
3.1 TITLE	☐ Change ☐ Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY - ST - ZIP	
4.1 TITLE	☐ Change ☐ Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY - ST - ZIP	
5.1 TITLE	☐ Change ☐ Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY - ST - ZIP	
6.1 TITLE	☐ Change ☐ Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY - ST - ZIP	

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 110.07(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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or as an attachment with an address.

SIGNATURE:

Henry R. Saddler

Henry R. Saddler

3/1/95 (407) 793-4454

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Telephone Number