FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1998 **DOCUMENT #**

N00433

(5)

	F	ILED	l
May	15	1998	8:00am
Sec	cret	ary of	State

1. Corporation	n Name	, ,	7							
ANDOVER D OF KINGS POINT CONDOMINIUM ASSOCIATION , INC.										
Principal Place of Business Mailing Address					,	-		DAGA DADA DAGA	. 01011 1001	
1904 CLUBHOUSE DRIVE SUN CITY CENTER FL 33573-4351 1904 CLUBHOUSE DRIVE SUN CITY CENTER FL 33573-4351				3-4351			3. Date Incorporated or Qualified 12/16/1983 4. FEI Number Applied For 59-2155840 Not Applicable			
9 Principal C	liana of Puninnes	So Mailing Addre					59-2155840			
2. Principal Place of Business		2a. Mailing Address			5.	Certificate of Status Desired	\$8.75 Ad Fee Requ			
Sulte, Apt.	#. etc.	Suite, Apt. #.	Suite, Apt. #. etc.							
22		27	H			"	6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees			
City & Stat	8	City & State	City & State			7.	Is this nonprofit corporation a homeowners association?			
23		28					☑ Yes ☐ No			
Zip	Country	Zip	Country		1	8,	This corporation owes or has paid the current year intangible			
24	25	29 30					Personal Property Tax due June 30. 🔽 Yes 🔲 No			
	9. Name and Address of Curr	ent Registered Agent		81		10,	Name and Address of New Registered Ag	ent		
Greene, Robert E. Florida Lifestyle Management 1904 Clubhouse Drive Sun City Center Fl 33573				83 84 City			FLI	85 Zip Co	!	
office or ragent. I a	to the provisions of Sections 617.00 egistered agent, or both, in the Sta in familiar with, and accept the obli	502 and 617, 1508, Florida te of Florida. Such chang gations of, Section 617.0	i Sta tutes, the e was author 503, Florida S	above zed by Statute:	e-named / the corp s.	corporation poration's k	on submits this statement for the purpose of clooard of directors. I hereby accept the appoin	hanging its r ntment as re	egistered gistered	
	Signature, typed or printed name of registered a	gent and title if applicable.	(NOTE: Regis	ered Age	ent signature	required when	reinstating) DATE			
12.		ND DIRECTORS		3.		Ž	ADDITIONS/CHANGES TO OFFICERS AND D	IRECTORS	IN 12	
TITLE	PD	☐ DEL	ETE 1.	1 TITLE				Change	Addition	
NAME	BOSTWICK, KEITH			1.2 NAME		i				
STREET ADDRESS	444 1115 41 44 41 41			1.3 STREET ADDRESS						
CITY-ST-ZIP	ALM AND ADDRESS OF			1.4 CITY-\$T-ZIP						
TITLE	VD DELETE			2.1 TITLE		:		Change	Addition	
NAME	LAZZARO, CHARLES			2.2 NAME		:	_			
STREET ADDRESS	DORESS 208 ANDOVER PLACE, SUITE 87			2.3 STREET ADDRESS						
CITY-ST-ZIP	SUN CITY CENTER FL			2. 4 CITY-ST-ZIP						
TITLE	TD	☐ DELI	TE 3.	1 TITLE		:	L	Change	Addition	
NAME	SIVER, HARRY			3.2 NAME						
STREET ADDRESS	206 ANDOVER PL.#D96		3.	3 STREET	ADDRESS					
CITY-ST-ZIP	SUN CITY CTR, FL 33573		3.	4. CITY-S	ST-ZIP					

6.4 CITY-ST-ZIP (a. 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 inficer 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 ock 12 or Block 13 if changed, or on an attachment with an address.

4.1 TITLE

4.2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST - ZIP

4.4 CITY-ST-ZIP

ALLEN

DELETE

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TITLE

NAME

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STREET ADDRESS

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CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

SD

GREFATH, CORA

GOLDSTEIN, JEAN

206 ANDOVER PL.,#81

SUN CITY CENTER FL

206 ANDOVER PL., #85

SUN CITY CTR, FL 00000

DORIS

206 ANDOVER PL. # 77

Addition

Addition

■ Addition

Change

Change