## 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 # N05706

(9)

ROYAL GRENADIER II CONDOMINIUM, INC.

Principal Place	e of Business		Mailing Address						OPRO BIJI BIJIH BIJH	J DIBII OPOL DA	IM 010HI 1001	
10191 W. SAMP CORAL SPRING		TE 203	10191 W. SAMPLE ROAD. SUITE 203 CORAL SPRINGS FL 33065				3. Date Incorporated or Qualif 10/12/1984 4. FEI Number	ied		pplied For		
2. Principal P	lace of Busine	58	2a. Mailing Ad	Mailing Address				59-2804084		\$8.75		
21			26					<ol><li>Certificate of Status Desired</li></ol>		Fee Re		
j Suπe, Apr.	#, etc.		Suite, Apt. #, etc.				-	6. Election Campaign Financir	9	\$5.00		
22			27					Trust Fund Contribution		Added to		
City & State	Đ		City & Sta	<del></del>			[ ]	7. Is this nonprofit corporation a homeowners association?				
Zip	Zip Country		Zip Country					B. This corporation owes or ha	s paid the cur	rept year Int	angible	
24	2		29	30	<u> </u>			Personal Property Tax due			] No	
9. Name and Address of Current Registered Agent								O. Name and Address of Nev	v Registered	Agent		
					81	Name	9					
BAKALAR, SUSAN P. P.A.						Street	Address	(P.O. Box Number is Not Acce	ptable)			
2240 SW 70TH AVENUE, UNIT D												
DAVIE FL 33317												
					84	City			FL	85 Zip (	Code	
11. Pursuant	to the provisio	ns of Sections 617.050	2 and 617.1508, Fi	orida Statutes, t	the above	-named	d corporat	tion submits this statement for (		changing it	s 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 age		(NOTE: Re		nt signature	re required wh	nen reinstating)	DATE			
12.		OFFICERS AN		B.F. Fee	13.			ADDITIONS/CHANGES TO O	FFICERS AND			
TITLE	PD		L.J	DELETE	1.1 TITLE					Change	☐ Addition	
NAME	HANSON,			1	1.2 NAME		1					
	STREET ADDRESS 9849 RIVERSIDE DR. G-5 CITY-ST-ZIP CORAL SPRINGS FL			1.3 \$1								
CITY-ST-ZIP TITLE	D D	TNINGS FL	-ba	DELETE	1.4 City-S 2.1 Title	1-ZIP	D			Change	Addition	
NAME	BALOG, J	MOSA		DECETE	2.2 NAME		MAN	ar martel.			**********	
STREET ADDRESS		RSIDE DR. 1-2			2.3 STREET	ADDRESS	964	icy martel 19 Riverside Di	1,6-1			
CITY-ST-ZIP	CORAL SI				2. 4 CITY-5		CDI	al Sprides, FL	- 330	フィ	•	
TITLE	D	THITOUTE	(X	DELETE	3.1 TITLE		Th.			Change	Addition	
NAME	WOOD, FI	REDERICK		· .	3.2 NAME		JAN	he Pollack				
STREET ADDRESS		RSIDE DR. B-2		Ì	3.3 STREET	ADDRESS	966	nie Pollack 5 Riverside Di	r.,エース			
CITY-ST-ZIP	CORAL SE				3.4. CITY - 5		Cor-	Al Springs, FL	. 3307	1		
TITLE	, , , , , , , , , , , , , , , , , , ,			DELETE	4.1 TITLE	-	1			Change	Addition	
NAME					4. 2 NAME		1					
STREET ADDRESS					4.3 STREET	ADDRESS	ſ					
CITY-ST-ZIP					4.4 CITY-S	T-ZIP						
TITLE				DELETE	5.1 TITLE					☐ Change	Addition	
NAME					5.2 NAME						ĺ	
STREET ADDRESS					5.3 STREET							
CITY-ST-ZIP				DCLESS	5.4 CITY-S	T-ZIP	<del> </del>		<del></del>		44100	
TITLE			LJ	DELETE	6.1 TITLE					☐ Change	☐ Addition	
NAME				1	6.2 NAME							
STREET ADDRESS					6.3 STREET		1					
CITY-ST-ZIP					6.4 CITY-S	T-ZIP	1				. 1	

14. 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 officer or director of the corporation or the receiver or mustee 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 on an attachment with an address.

SIGNATURE: Strice Denova

CR2E037 (10/97)

**FILED** 

Mar 30 1998 8:00am

Secretary of State