

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

CORPORATION
ANNUAL REPORT
1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Northington
Secretary of State
DEPARTMENT OF CORPORATIONS

APPROVED
AND
FILED

50 MAY -1 AM 9:01

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N10337** (6)
1. CORPORATION NAME
COURT ROYALE CONDOMINIUM ASSOCIATION, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business Mailing Address
2900 UNIVERSITY DRIVE **2900 UNIVERSITY DRIVE**
CORAL SPRINGS FL 33065-4152 **CORAL SPRINGS FL 33065-4152**

3. Date Incorporated or Qualified 07/19/1985	3a. Date of Last Report 03/30/1994
4. FEI Number 59-2832973	Applied For Not Applicable
5. Certificate of Status Desired ☒	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐	\$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. State Apt. # etc.	26. c/o AMERA PROPERTIES INC.
22. City & State	27. 2930 UNIVERSITY DRIVE,
23. Zip	28. CORAL SPRINGS FL
24. Country	29. 33065
25. Country	30. U.S.A.

9. Name and Address of Current Registered Agent

LAQUIS, GEORGE A.
10168 W. SAMPLE ROAD
CORAL SPRINGS FL 33065

10. Name and Address of New Registered Agent

81. Name	85. Zip Code
82. Street Address (P.O. Box Number is Not Acceptable)	
83.	
84. City	FL

11. Pursuant to the provisions of Sections 607.05(2) 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 must be handwritten. Registered agent must sign in ink. (The officer designated agent must sign in ink as well.)

Date

12. OFFICERS AND DIRECTORS		13. ADDITIONS, CHANGES TO OFFICERS AND DIRECTORS, IF ANY	
TITLE	PD	11. TITLE	☐ Change ☐ Addition
NAME	LAQUIS, GEORGE A.	12. NAME	
STREET ADDRESS	10168 W. SAMPLE ROAD	13. STREET ADDRESS	
CITY, ST, ZIP	CORAL SPRINGS FL	14. CITY, ST, ZIP	
TITLE	STD	15. TITLE	☐ Change ☐ Addition
NAME	RAHAEL, GEORGE	16. NAME	
STREET ADDRESS	2930 UNIVERSITY DRIVE	17. STREET ADDRESS	
CITY, ST, ZIP	CORAL SPRINGS FL	18. CITY, ST, ZIP	
TITLE	VD	19. TITLE	☐ Change ☐ Addition
NAME	SABGA, ANTOINE	20. NAME	
STREET ADDRESS	9337 W. SAMPLE RD, S211	21. STREET ADDRESS	
CITY, ST, ZIP	CORAL SPRINGS FL	22. CITY, ST, ZIP	
TITLE		23. TITLE	☐ Change ☐ Addition
NAME		24. NAME	
STREET ADDRESS		25. STREET ADDRESS	
CITY, ST, ZIP		26. CITY, ST, ZIP	
TITLE		27. TITLE	☐ Change ☐ Addition
NAME		28. NAME	
STREET ADDRESS		29. STREET ADDRESS	
CITY, ST, ZIP		30. CITY, ST, ZIP	

14. I, the undersigned, certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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, the recipient 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 on the statement with an address.

SIGNATURE:

SIGNATURE AND PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

GEORGE RAHAEL

Date

4/25/95 (305) 753-9500

(Signature Printed)