## 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 # N11525 (5)					
BERKELEY SQUARE ASSOCIATION, INC.					
Principal Place	e of Business	Mailing Address			IIT OIBIN OIGIN VION VIAH NOBT
5201 NE 14TH	TERRACE	5201 NE 14TH TERRACE		3. Date Incorporated or Qualified	
#209		•	10/10/1985		
		FT. LAUDERDALE FL 3333 US	34	4. FEI Number	Applied For
				59-2612540	Not Applicable
2. Principal Pi	ace of Business	2s. Mailing Address		5. Certificate of Status Desired	\$8.75 Additional Fee Required
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		6. Election Campaign Financing	\$5.00 May Be
22		27		Trust Fund Contribution	Added to Fees
City & State	9	City & State		7. Is this nonprofit corporation a homeowne	
<b>23</b> Zip	Country	28 Zip	Country		-No
24	25	29	30	<ol> <li>This corporation owes or has paid the cu Personal Property Tax due June 30.</li> </ol>	Trent year intangible ☐ Yes ☐ No
	9. Name and Address of Current			10. Name and Address of New Registered	
			81 Name	Steve Reid	
				ddress (P.O. Box Number is Not Acceptable)	· <u></u>
5201 NE 14TH TERRACE #2			83	200 NE144 GAY #304	
FI. LAU	DERDALE FL 33334				
			84 City	t. lander date FL	85 Zip Code 4
11. Pursuant	to the provisions of Sections 617.0502	and 617.1508, Florida Statu	ites, the above-named c	orporation submits this statement for the purpose of	f changing its registered
agent. I a			lorida Statutes.	oration's board of directors. I hereby accept the app	contrnent as registered
SIGNATURE		Kie Keid		1/26/	98
12.	Signature, typed or printed name of registered agent OFFICERS AND		TE Registered Agent signature re 13.	ADDITIONS/CHANGES TO OFFICERS AN	DIRECTORS IN 12
TITLE	VD	DELETE	1.1 TITLE	Abbillions of Wide 10 of Fiberra 111	☐ Change ☐ Addition
NAME	ANDREWS, STAN	/ \	1.2 NAME		
STREET ADDRESS	909 MORNING SUN DR		1.3 STREET ADDRESS		•
CITY - ST - ZIP	BIRMINGHAM AL		1.4 CITY - ST - ZIP		
TITLE	PD	DELETE	2.1 TITLE		Change Addition
NAME	REID, STEVE 5200 NE 14TH WAY		2.2 NAME	FROM ALT WILL LINE #204	
STREET ADDRESS	FT LAUDERDALE FL			5200 NE 1411 Way #304	
CITY-ST-ZIP TITLE	TD	☐ DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE		☐ Change ☐ Addition
NAME	D'AGNESE, MAUREEN	_	3.2 NAME		
STREET ADDRESS	5200 NE 14TH WAY #403		3.3 STREET ADDRESS		
CITY-ST-ZIP	FT. LAUDERDALE FL		3.4. CITY-ST-ZIP		
TITLE	SD	☐ DELETE	4,1 TITLE		☐ Change ☐ Addition
NAME	LANZANA, LINDA		4. 2 NAME		
STREET ADDRESS	5201 NE 14TH TERRACE #208		4.3 STREET ADDRESS		
CITY-ST-ZIP TITLE	FT. LAUDERDALE FL VD	DELETE	4.4 CITY-ST-ZIP 5.1 TITLE		Change Addition
NAME	LUCHESI, RICHARD		5.2 NAME		
STREET ADDRESS	5200 NE 14TH WAY #406		5.3 STREET ADDRESS		
CITY-ST-ZIP	FT LAUDERDALE FL		5.4 CITY - ST-ZIP		
TITLE		☐ DELETE	6.1 TITLE	DO Charles Here	Change Addition
NAME			6.2 NAME	Reuben Hernandez 5 goi NE 14 Tellacc - 4 Ft. Laufeldale, Florida 333	<b>س</b> ی
STREET ADDRESS			6.3 STREET ADDRESS	Et Inviendate Flante 200	3 U
CITY-ST-7IP			6.4 CITY-ST-ZIP	I TO ATHLER PRODUCT, I- POPLET 255	<i>D  </i>

In 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 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 attachment with an address

GNATURE:

SHOVE Rev. | Re

SIGNATURE:

Steve Reid

**FILED** 

Feb 18 1998 8:00am

Secretary of State