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NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

POCUMENT # N11573

(5)

FILED
Jan 23 1998 8:00am
Secretary of State

VIZCAYA AT PALM-AIRE AS	SOCIATION, INC.					
Principal Place of Business Mailing Address		**		I SODZINAN DON DINDON NADAN BANAK ADADON ININ ENDAN E	IBN DIBN BIBN DIBN GIBN NOR	
1280 S.W. 36TH AVE. 8UITE #301 POMPANO BEACH FL 33069 1280 S.W. 36TH AVE. SUITE #301 POMPANO BEACH FL 33069				3. Date incorporated or Qualified 10/14/1985 4. FEI Number	10/14/1985	
				59-2710019	Not Applicable	
2. Principal Place of Business 2a. Mailing Address 21				5. Certificate of Status Desired	\$8.75 Additional Fee Required	
Sulte, Apt. #, etc. Suite, Apt. #, etc. 27				Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees	
City & State City & State				7. Is this nonprofit corporation a homeowners association? X Yes \(\subseteq \text{No} \)		
Zip Country 25	29 30	29 30		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. X Yes No		
9. Name and Address o	f Current Registered Agent			10. Name and Address of New Registered	Agent	
CALATCHI, RALPH DR. 1280 S.W. 36TH AVE. SUITE #301 POMPANO BEACH FL 33069		82 S	82 Street Address (P.O. Box Number is Not Acceptable) 83			
office of registered agent, or both, in the	617.0502 and 617.1508, Florida Statutes, the he State of Florida. Such change was authori ne obligations of, Section 617.0503, Florida S	ized by the	amed corp corporat	poration submits this statement for the purpose of the purpose of the space of the	of changing its registered	

Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. DELETE TITLE 1.1 TITLE Change Addition NAME CALATCHI, R. DR. 1.2 NAME STREET ADDRESS 1280 S.W. 36TH AVE. STE. #301 1.3 STREET ADDRESS **POMPANO BEACH FL** CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE SD DELETE ☐ Change Addition 2.1 TITLE HERTZ, JOHN NAME 2.2 NAME STREET ADDRESS 1280 S.W. 36TH AVE. STE. #301 2.3 STREET ADDRESS CITY-ST-ZIP PMMPANO BEACH FL 33069 2. 4 CITY - ST - ZIP TITLE □ DELETE 3.1 TITLE Change Addition NAME MAILLOUX, LEE A 3.2 NAME 1280 S.W. 36TH AVE. STE. #301 STREET ADDRESS 3.3 STREET ADDRESS POMPANO BEACH FL 33069 CITY-ST-ZIP 3.4. CITY-ST-ZIP TITLE ___ DELETE 4.1 TITLE Change Addition NAME TRONCO, RITA 4.2 NAME 4130 PALMAIRE DIXIE W., BLDG 7/301A STREET ADDRESS 4.3 STREET ADDRESS POMPANO BEACH FL CITY-ST-ZIP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE ☐ Change Addition NAME 5.2 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY - ST - ZIP TITLE DELETE Change Addition 6.1 TITLE NAME . 6.2 NAME

6.4 CITY-ST-ZIP 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 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 an attachment with an address.

6.3 STREET ADDRESS

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

1 hales

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