FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

(5)

FILED Apr 03 1998 8:00am Secretary of State

ASPHALI ANGELS, INC.		2 12 2		
Principal Place of Business	Mailing Address		(12011/31 001 118/0 (1001 10111 128/0 13)) BIELL GIBL	A1911 91911 B1911 91311 1651
C/O RICHARD F. FOREMAN 12231 ACAPULGO AVE PALM BEACH GARDENS FL 33410 US	ASPHALT ANGELS, INC. P.O. BOX 460 LOXAHATCHEE FL 33470 US		 3. Date Incorporated or Qualified 12/31/1985 4. FEI Number 59-2666916 	Applied For
2. Principal Place of Business	2a. Malling Address		5. Certificate of Status Desired	\$8.75 Additional Fee Required
Suite, Apt. #, etc.	Suite, Apt. #, etc.		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? No
Zip Country 24 25	Zip Co 29 30	ountry	This corporation owes or has paid the curre Personal Property Tax due June 30.	ent year Intangible Yes
9. Name and Address of Curren	it Registered Agent		10. Name and Address of New Registered A	gent
RICHARD F. FOREMAN 12231 ACAPULCO AVE		81 Name 82 Street Add	dress (P.O. Box Number is Not Acceptable)	
PALM BEACH GARDENS FL 33410		83		
		84 City	FL	85 Zip Code
 Purauant to the provisions of Sections 617.050 office or registered agent, or both, in the State agent. I am familiar with, and accept the obligi 	⊦of Florida. Such change was authoriza	ed by the corpora	rporation submits this statement for the purpose of cation's board of directors. I hereby accept the appo	changing its registered introduced introduced in the control of th
SIGNATURE				

agent. I am tamiliar with, and accept the colligations of, Section 617.0003, Florida Statutes.								
SIGNATURE Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE								
12.	OFFICERS AND DIRECTORS		13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
TITLE	PD	DELETE	1.1 TITLE U · P	Change Addition				
NAME	RICHARD F. FOREMAN		1.2 NAME	Richard F. FOREMAN Change LAddition				
STREET ADDRESS	12231 ACAPULCO AVE		1.3 STREET ADDRESS	12281 ACAPULCOAUR				
CITY-ST-ZIP	PALM BEACH GARDENS FL		1.4 CITY - ST - ZIP	Palm Beach GARdens FL 33410				
TITLE	TD	DELETE	2.1 TITLE	Change Addition				
NAME	NEILE NELSON		2.2 NAME					
STREET ADDRESS	12231 ACAPULCO AVE		2.3 STREET ADDRESS	• •				
CITY-ST-ZIP	PALM BEACH GARDENS FL		2.4 CITY-ST-ZIP					
TITLE	V O	DELETE	3.1 TITLE 🌵 📉	Don Change LAddition				
NAME	KEITH BERGQUEST	,	3.2 NAME	DONALD HANCOCK				
STREET ADDRESS	\$6 BARBERTON RD		3.3 STREET ADDRESS	12123 KeyLIME BALL				
CITY-ST-ZIP	LAKE WORTH FL		3.4, CITY-ST-ZIP	DONALD HANCOCK 12123 KeyLIME BLVD Palan BEACH GARDENS FL 33412				
TITLE	8	DELETE	4.1 TITLE	Change Addition				
NAME	MILLER, ANNIE		4. 2 NAME					
STREET ADDRESS	100 CONASKONK		4.3 STREET ADDRESS					
CITY-ST-ZIP	ROYAL PALM BEACH FL		4.4 CITY - ST - ZIP					
TITLE	D	☐ DELETE	5.1 TITLE	Change Addition				
NAME	HILL, LARRY		5.2 NAME					
STREET ADDRESS	100 CONAS KONK		5.3 STREET ADDRESS					
CITY-ST-ZIP	ROYAL PALM BEACH FL		5.4 CITY-ST-ZIP					
TITLE ·	D	DELETE	6.1 TITLE	Change Addition				
NAME	TILLERY JR, DON		6.2 NAME					
STREET ADDRESS	13530 59 COURT N		6.3 STREET ADDRESS					
	WALL BOLL OF							

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 cath; 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 13 if changed, or on an aparchment with an address.