

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **N17467** (4)

1. Corporation Name

CORAL GATE HOMEOWNERS ASSOCIATION INC.



Principal Place of Business

Mailing Address

**1811 CORAL GATE DR.
MIAMI FL 33145
US**

**1811 CORAL GATE DRIVE
MIAMI FL 33145**

3. Date Incorporated or Qualified

10/23/1986

3a. Date of Last Report

04/21/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

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30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**NICHTBERGER, SEYMOUR
1811 CORAL GATE DRIVE
MIAMI FL 33145**

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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 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 ☐ DELETE

**P
ALMAGUER, CAL
1931 SW 32 PLACE
MAIMI FL**

1.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

**SD
GARRIDO, GRACE
3620 S.W. 20TH ST.
MIAMI FL**

2.1 TITLE ☐ Change ☐ Addition

TITLE ☒ DELETE

**VP
XIGUES, GLORIA
3320 SW 17 ST
MIAMI FL**

3.1 TITLE ☒ Change ☒ Addition

TITLE ☐ DELETE

**VD
FERNANDO, PORTUONDO
1911 SW 33RD CT.
MIAMI FL**

4.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

**TD
NICHTBERGER, SEYMOUR
1811 CORAL GATE DRIVE
MIAMI FL**

5.1 TITLE ☐ Change ☐ Addition

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: **Seymour Nichtberger** *Seymour Nichtberger* **4-396 308 443-6345**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)