

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

CORPORATION
ANNUAL REPORT

1995



FLORIDA DEPARTMENT OF STATE
Sandra B. Morham
Secretary of State

OFFICE OF CORPORATIONS

APPROVED
AND
FILED

95 MAY -1 AM 9:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N21987 (5)**

1. Corporation Name

FRENCH RIVIERA VILLAGE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

9502 SW 1ST PLACE
CORAL SPRINGS FL 33071
US

C/O M. HUBERT
9502 SW 1ST PLACE
CORAL SPRINGS FL 33071
US

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

08/11/1987

3a. Date of Last Report

03/22/1994

4. FEI Number

65-0034616

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)

☐

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 199.032,
Florida Statutes

☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

HUBERT, MARILYN G
9502 SW 1ST PLACE
CORAL SPRINGS FL 33071

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 607.0502 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, typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when mandating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	PD
NAME	HUBERT, MARILYN
STREET ADDRESS	9502 SW 1ST PLACE
CITY - ST - ZIP	CORAL SPRINGS FL
TITLE	VDSD SECRETARY
NAME	TALARSKY, NANCY
STREET ADDRESS	10611 NW 44TH ST
CITY - ST - ZIP	CORAL SPRINGS FL
TITLE	TD
NAME	MASI, TERI
STREET ADDRESS	9510 SW 1ST PL
CITY - ST - ZIP	CORAL SPRINGS FL
TITLE	D
NAME	LOISELLE, SYLVAN
STREET ADDRESS	5231 NW 85TH TERRACE
CITY - ST - ZIP	CORAL SPRINGS FL
TITLE	B Vice President
NAME	MC FARLAND, FRED
STREET ADDRESS	9530 SW 1 PL
CITY - ST - ZIP	CORAL SPGS FL
TITLE	
NAME	
STREET ADDRESS	
CITY - ST - ZIP	

11 TITLE	☐ Change ☐ Addition
12 NAME	
13 STREET ADDRESS	
14 CITY - ST - ZIP	
21 TITLE	☒ Change ☐ Addition
22 NAME	SECRETARY
23 STREET ADDRESS	PATRICIA RUSS
24 CITY - ST - ZIP	9520 SW 1ST PLACE
25 CITY - ST - ZIP	CORAL SPRINGS, FL 33071
31 TITLE	☐ Change ☐ Addition
32 NAME	
33 STREET ADDRESS	
34 CITY - ST - ZIP	
41 TITLE	☐ Change ☐ Addition
42 NAME	
43 STREET ADDRESS	
44 CITY - ST - ZIP	
51 TITLE	☒ Change ☐ Addition
52 NAME	VICE PRESIDENT
53 STREET ADDRESS	
54 CITY - ST - ZIP	
61 TITLE	☐ Change ☐ Addition
62 NAME	
63 STREET ADDRESS	
64 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 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 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/26/95 341-2887

1328

FRENCH RIVIERA VILLAGE CONDO ASSN.

PAY
TO THE
ORDER OF

March 8 1995 ⁰³⁻⁰⁸⁻⁹⁵
 Florida Department of State \$ 130.00
 One Hundred and Thirty Dollars ** DOLLARS

CITIBANK

 CITIBANK, P.O. BOX 77
 MIAMI W. SAMPLE FOL
 MARSHALL, FL 33099

FOR

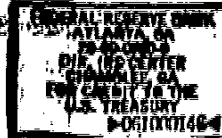
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