## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT **CORPORATION ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT #

N24994

(8)

SOUTH EAST FLORIDA APARTMENT ASSOCIATION, INC.

| Principal Place                         | e of Business  | Mailing Address   |  |  | #  | 41 B1014 B1011 4101                | JE CEREL BUR                   | <u> </u>              |  |
|---|--|---|--|--|--|------------------------------------|--------------------------------|-----------------------|--|
| 4700 NW 2ND /                           | NVE.   | 4700 NW 2ND AVE.  |  |  |  |                                    |                                |                       |  |
| 203                                     |  | 203   |  |  |  |                                    |                                |                       |  |
| BOCA RATON FL 33431<br>US               |  | BOCA RATON FL 33431-4860<br>US  |  | 7  | 3. Date Incorporated or Qualified 02/24/1988                             | 3a. Date of Last Report 04/02/1996 |                                |                       |  |
| <u> </u>                                | ace of Business  | 2a. Mailing Address   |  |  | FEI Number   | ·L                                 | Apı                            | plied For             |  |
|   | South Dixie Highway  |   | ixie Highwa                                    | ay   | 65-0036888   |                                    |                                | t Applicable          |  |
| Suite, Apt. #, etc. 2 5th Floor         |  | Suite, Apt. #, etc. 5th Floor   | 5th Floor                                      |  | 5. Certificate of Status Desired   |                                    | \$8.75 Additional Fee Required |                       |  |
| City & State                            |  | City & State  | Date Dates 177                                 |  | 6. Election Campaign Financing   |                                    | 55.00                          |                       |  |
|   | Raton, FL  | Z <sub>P</sub> Boca Raton, I  |  |  | Trust Fund Contribution  |                                    | Added to                       |                       |  |
| Zip<br><b>24</b> ] <b>33</b> 432        | Country 25   | 29 33432 30   | Country  | 1  | 3. This corporation has liability for in Florida Statutes                | ntangible tax u<br>Yes 🔲 No        |                                | 199.032,              |  |
| 24 33432                                | 9. Name and Address of Currer  |   | <u> </u>                                       |  | D. Name and Address of New Reg   |                                    |                                |                       |  |
|   |  |   | 81 Name  |  |  | •                                  |                                |                       |  |
| CUBILLA                                 | INCEDII ID   |   |  | Jalan  | e L. Kellough  |                                    |                                |                       |  |
| CURILLA, JOSEPH JR.<br>4700 NW 2ND AVE. |  |   |  |  | dress (P.O. Box Number is Not Acceptable) 550 South Dixie Highway        |                                    |                                |                       |  |
| STE 203                                 |  |   | 83   | 1020   | South Dixie Highway  |                                    |                                |                       |  |
|   | ATON FL 33431  |   |  | 5th F  | loor   |                                    |                                |                       |  |
| DOOM IN                                 | ATOM 1 E 33431   |   | 84 City  | T)   | D - 1 - 1  | FL 85                              | 334 Zip C                      | Code                  |  |
| 11. Pursuant I                          | to the provisions of Sections 617.050  | 2 and 617.1508 Horida Statutes.   | the above-named                                | BOCA corporat                                    | Raton ion submits this statement for the p                               |                                    | <u>1 334</u><br>noina its      | : 32<br>s registered  |  |
| office or r                             | to the provisions of Sections 617.050 egistered agent, or both, in the State of familiar with, and accept the oblig        | of Florida. Ston change was aut   | horized by the corp                            | poration's                                       | board of directors. I hereby accep                                       | t the appointn                     | nent as r                      | registered            |  |
|   |  | Alighis of, segment 617.0003, Fronc   | บล อเลเนเซร.                                   |  | Anr  | 11 15, 1                           | 997                            |                       |  |
| SIGNATURE (                             | Signature, typed or printed hamo of registare? age   | ent and title it uplicable (NO1E; F   | Registered Agent signature                     | e required wh                                    | •  | DATE                               |                                |                       |  |
| 12.                                     | OFFICERS AN  | D DIRECTORS   | 13.  | <del>:</del>                                     | ADDITIONS/CHANGES TO OFFIC   | ERS AND DIR                        | ECTOR                          | S IN 12               |  |
| TITLE                                   | ĒVΡ  | X DELETE  | 11 TITLE                                       | EVP  |  |                                    | Change                         | X Addition            |  |
| NAME                                    | CURILLA, JOSEPH JR.  |   | 1.2 NAME                                       | 1  | ne L. Kellough   |                                    |                                |                       |  |
| STREET ADDRESS                          | 4700 NW 2ND AVE.   |   | 1.3 STREET ADDRESS                             | 1650   | S. Dixie Highway,  | 5th Flo                            | or                             |                       |  |
| CITY-ST-ZIP                             | BOCA RATON FL  |   | 1.4 CITY - ST - ZIP                            | Boca   | Raton, FL 33432  |                                    |                                |                       |  |
| TITLE                                   | PĎ   | DELETE  | 2.1 TITLE                                      |  |  | [3]                                | Change                         | Addition              |  |
| NAME                                    | BROWN, CAROLYN   |   | 2.2 NAME                                       |  |  |                                    |                                |                       |  |
| STREET ADDRESS                          | 4700 NW 2ND AVE.   |   | 2.3 STREET ADDRESS                             | P.O.   | Box 4545 - N/A   |                                    |                                |                       |  |
| CITY-ST-ZIP                             | BOCA RATON FL  |   | 2 4 City-St-ZiP                                |  | ton Beach, FL 3342   |                                    |                                |                       |  |
| TITLE                                   | TD   | ☐ DELETE  | 3.1 TITLE                                      | STD  |  | LXI                                | Change                         | Addition              |  |
| NAME                                    | FERNALD, OLAF  |   | 3.2 NAME                                       | 001  | Hidahama Mannaga   |                                    |                                |                       |  |
| STREET ADDRESS                          | 4700 NW 2ND AVE.   |   | 3.3 STREET ADDRESS                             |  | Hickory Terrace  |                                    |                                |                       |  |
| ADITY-ST-TP                             | BOCA RATON FL  | T prists  | 3.4 CITY-ST-ZIP                                | воса   | Raton, FL 33486  | 133                                | Obenne                         | T deleter -           |  |
| TITLE                                   | VD   | ☐ DELETE  | 4.1 TITLE                                      | 1  |  | LAY (                              | Change                         | Addition              |  |
| NAME<br>OTOGET ADDRESS                  | BEVIS, MARIE   |   | 4.2 NAME                                       | 0  | Dowle Dings /401 htt /   |                                    | 104                            | to 195                |  |
| STREET ADDRESS                          | 4700 NW 2ND AVE.<br>BÓCA RATON FL  |   | •  |  | Park Place/621 NW S  | osta St.                           | / 5u1                          | .te 123               |  |
| CITY-ST-ZIP<br>TITLE                    | BUCA RATON FL  | DELETE  | 4.4 CITY-ST-ZIP<br>5.1 TITLE                   | воса   | Raton, FL 33487  |                                    | Change                         | Addition              |  |
| NAME                                    |  |   | 5.1 ITTLE<br>5.2 NAME                          |  |  | ٠ ا                                | n on Ag                        | L Vagition            |  |
| STREET ADDRESS                          |  | · ·   | 5.3 STREET ADDRESS                             |  |  |                                    |                                |                       |  |
| CITY-ST-ZIP                             |  |   | 5.4 CITY-ST-ZIP                                |  |  |                                    |                                |                       |  |
| TITLE                                   |  | DELETE  | 6.1 TITLE                                      | <del>                                     </del> |  |                                    | Change                         | Addition              |  |
| NAME                                    |  | <b>—</b>  | 6.2 NAME                                       |  |  |                                    | <b>a</b> -                     | - <del></del> '''''   |  |
| STREET ADDRESS                          |  |   | 6.3 STREET ADDRESS                             |  |  |                                    |                                |                       |  |
| CITY-ST-ZIP                             |  |   | 6.4 CITY - ST - ZIP                            |  |  |                                    |                                |                       |  |
| 14. I do heret                          | by certify that the information supplie  |   | for the exemption s                            |  |  |                                    |                                |                       |  |
| Informatio<br>I am an o<br>appears i    | n Indicated on this annual report or a<br>fficer or director of the corporation of<br>h Block 12 or Block 13 if changed, o | supplemental annual report is true<br>r the receiver or trustee emposer<br>ir on an atlantiment with an Andre | e and accurate and<br>ed to execute this rass. | d that my<br>report as                           | signature shall have the same lega<br>required by Chapter 617, Florida S | effect as if m<br>latutes; and th  | ade und<br>lat my ni           | Jer oath; that<br>ame |  |

**FILED** 

Apr 23 1997 8:00am

Secretary of State