

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

DOCUMENT # N27998 (6)

1. Corporation Name

DURR'S HOMEOWNER ASSOCIATION INC.

Principal Place of Business

713 NW 19TH AVENUE
C/O GALE ATKINSON
FT. LAUDERDALE FL 33311-7833

Mailing Address

713 NW 19TH AVENUE
C/O GALE ATKINSON
FT. LAUDERDALE FL 33311-7833

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

29

30

9. Name and Address of Current Registered Agent

MARTIN
ATKINSON, GALE
713 NW 19TH AVENUE
FT. LAUDERDALE FL 33311

3. Date Incorporated or Qualified

08/22/1988

4. FEI Number

NOT APPLICABLE

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. Is this nonprofit corporation a homeowners association?



Yes ☐ No

8. This corporation owes or has paid the current year intangible
Personal Property Tax due June 30.



Yes ☐ No

10. Name and Address of New Registered Agent

81 Name

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

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

TITLE VPD ☐ DELETE

NAME DYKES, ESSIE
STREET ADDRESS 812 NW 19TH AVENUE
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE P ☐ DELETE

NAME HINTON, EARL
STREET ADDRESS 713 NW 19TH AVE
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE SD ☐ DELETE

NAME ESSIE, THOMAS
STREET ADDRESS 1721 N.W. 7TH PL.
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE DS ☐ DELETE

NAME WATTS, TERRY Terri
STREET ADDRESS 729 NW 19TH TERR
CITY-ST-ZIP FT LAUD FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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.

SIGNATURE

Handwritten signature

APPROVED
AND
FILED

18 JUN -5 PM 3:30

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



CR2E037 (10/97)

5/29/98 561-966-6692