FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

DOCUMENT # N28166

1. Corporation Name

(9)

CAPISTRANO TOWNHOMES CONDOMINIUM ASSOCIATION, IN

G.					
Principal Place	of Business	Mailing Address	•		199 AIRIT AIRT BIAIS BIA11 AIRII AIRII 1981
906 SE 12TH CT 906 SE 12TH CT FT. LAUDERDALE FL 33316 FT. LAUDERDALE FL 333			16		
				3. Date Incorporated or Qualified 08/23/1988	3a. Date of Last Report 04/28/1995
2. Principal Pla	ce of Business	2a. Mailing Address 26		4. FEI Number 65-0077315	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required
Gity & State		City & State	<u></u>	Election Campaign Financing Trust Fund Contribution	S5.00 May Be Added to Fees
Zip ⊐	Country	Zip	Country	8. This corporation has liability for in	tangible tax under s. 199.032, Yes 🔲 No
4	9. Name and Address of Curre	29 ant Registered Agent	30	Florida Statutes 10. Name and Address of New Re	
	g. Name and Address of Curre	in riegiaterea Agent	81 Name		3.00.00
NOOSING	OW, JERRY M.			Schechter, Richard	
	12TH CT #18			ldress (P.O. Box Number is Not Acceptable 905 SE 12 Court #1	
FT LAUDERDALE FL 33316			83	JOJ DE 12 COUIC #.	
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			<u> </u>		
			84 City	Ft. Lauderdale	FL 85 Zip Code 33316
11. Pursuant to	the provisions of Sections 617.050	2 and 617.1508, Florida Statutes	the above named cor	poration submits this statement for the purp	ose of changing its registered office
Or constere	ed agent, or both, in the State of the	figa. Such change was authorized	d by the corporation's b	poration submits this statement for the purpoper of directors. I hereby accept the appoint	intment as registered agent. I am
C :	2 - Charles Congalibris 1, lea				
SIGNATURE _	rgnature: typed or printed marie of registered age	Land tile if apply at no (NOTE	E: Registered Agent signature red	d Schechter, P/D uned when renstating:	2/20/96
12.		ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFIC	
nre	PD	X]DELETE	1 1 TITLE	PD	Change XX Addition
NAME	CROWL, CLAIRE		12 NAME	Schechter, Richard	
STREET ADDRESS	905 SE 12TH CT, 12		1 3 STREET ACDRESS	905 SE 12th Ct., #16	
CITY-ST-ZIP	FT LAUDERDALE FL		1.4 CITY - ST - ZIP	<u>Ft. Lauderdale, FL</u>	
TITLE	10	XX) DELETE	21 TITLE	TD	Change XX Addition
NAME	DUNFORD, SANDRA		2 2 NAME	McIlwaine, Patsy	
STREET ADDRESS	905 S.E. 12TH CT #14		2.3 STREET AUDRESS	905 SE 12th Ct., #6	
CITY-ST-ZIP	FT LAUDERDALE FL	· · · · · · · · · · · · · · · · · · ·	2 4 CITY-ST-ZIP	Ft. Lauderdale, FL	
TITLE	VPD	XXIDELETE	3 1 TITLE		Change Addition
NAME	INCLEDOM, JACKIE		3 2 NAME		
STREET ADDRESS	905 S.E. 12TH CT #18		3 3 STREET ADDRESS		
CITY+ST-ZIP	FT LAUDERDALE FL SD	Donne	3.4 CHY-ST-ZIP		☐ Change ☐ Addition
TITLE	PHILLIPS, LYN	DELETE	4 1 TITLE		Citalige Audition
NAME	905 SE 12TH CT, 13		4 2 NAME		
STREET ADDRESS	FT LAUDERDALE FL		4 3 STREET ADDRESS		
CITY - ST - ZIP	T ENOULHUALE FL	□ DELETE ·	4.4 C(TY-ST-Z(P) 5.1 T(TLE		Change Addition
TITLE		□] htreis	3 11110		C onunge C Addition
NAME CIRCLI ADODESC			5.2 NAME		
STREET ADDRESS			5 3 STREET ADDRESS 5 4 CHY+ST-ZIP		
CITY-ST-ZIP TITLE		DELETE	61 THILE		Change Addition
NAME		L. Dett. r	6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
		٠٠٠.	6 4 CITY - ST - ZIP		
14. I do hereb	y certify that the information subplies	d with this filing is voluntarily furnis	shed and does not qual	fy for the exemption stated in Section 119.0	07(3)(k), Florida Statutes, I further
and fished	the information indicated on this an	oual rapart for cupaliferantal appu	al report is thus and acc	urate and that my signature shall have the this report as required by Chapter 617, Flo	same legal effect as it mage linger

SIGNATURE:

GNATURE AND TYPED OR