

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



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

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DOCUMENT # **N28251** (9)

1. Corporation Name

GLADES EAST HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business

Mailing Address

5995 BANNOCK TERR
BOYNTON BCH FL 33437

5995 BANNOCK TERR
BOYNTON BCH FL 33437

3. Date Incorporated or Qualified **09/08/1988** 3a. Date of Last Report **03/31/1995**

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number **65-0105680** Applied For Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired **\$8.75 Additional Fee Required**

City & State

City & State

6. Election Campaign Financing Trust Fund Contribution **\$5.00 May Be Added to Fees**

23

28

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

24

25

Country

29

Zip

30

Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**CRYSTAL COMMUNITY MANAGEMENT, INC.
C/O JOE BARTLETT
5995 BANNOCK TERR
BOYNTON BCH FL 33437**

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 consulting)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	MARKOWITZ, MARVIN	
STREET ADDRESS	6088 TERRA MERE CIR	
CITY-STATE-ZIP	BOYNTON BEACH FL	
TITLE	TD	<input type="checkbox"/> DELETE
NAME	JACOBS, JANYCE	
STREET ADDRESS	6160 TERRA MERE CIR	
CITY-STATE-ZIP	BOYNTON BEACH FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	FIELDS, RICHARD	
STREET ADDRESS	11965 MONT LAKE DR	
CITY-STATE-ZIP	BOYNTON BCH FL	
TITLE	PD	<input type="checkbox"/> DELETE
NAME	HERMAN, ROBERT	
STREET ADDRESS	11995 MONT LAKE DR.	
CITY-STATE-ZIP	BOYNTON BEACH FL	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	WILLENS, SUMNER	
STREET ADDRESS	6045 TERRA MERE CIR	
CITY-STATE-ZIP	BOYNTON BEACH FL	
TITLE	VD	<input type="checkbox"/> DELETE
NAME	ROSS, PHILMORE	
STREET ADDRESS	6100 TERRA MERE CIR	
CITY-STATE-ZIP	BOYNTON BCH FL	

1.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	GREENBERG, SONIA	
1.3 STREET ADDRESS	6136 TERRA MERE CIRCLE	
1.4 CITY-STATE-ZIP	BOYNTON BEACH, FL	
2.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME		
2.3 STREET ADDRESS		
2.4 CITY-STATE-ZIP		
3.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS		
3.4 CITY-STATE-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-STATE-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-STATE-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-STATE-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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Robert Herman President **RE HERMAN**

Date:

Daytime Phone #

409-234-8005

CR2E037 (12/95)

2 of 2

Glades East Homeowners Association, Inc.

*5995 Bannock Terrace
Boynton Beach, Florida 33437*

—
(407) 734-8005

D
SCHAFFER, ANDOR
6148 TERRA MERE CIRCLE
BOYNTON BEACH, FL

D
SEGALL, EDWARD
6070 TERRA MERE CIRCLE
BOYNTON BEACH, FL

D
TAUB, ANDREW
6046 TERRA MERE CIRCLE
BOYNTON BEACH, FL