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 #

N29936

(4)

FILED

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SECRETARY OF STATE

GLADES FIRST COURT CONDOMINIUM ASSOCIATION, INC.					TALLAHASSEE. FLORIDA	
Principal Place of Business Mailing Address						
C/O ALEC ENGELSTEIN C/O ALEC ENG 123 N.W. 13TH STREET. SUITE 300 123 N.W. 13TH BOCA RATON FL 33432 BOCA RATON			TH STREET, SUITE 300			3. Date Incorporated or Qualified 12/29/1988
	. • • • • • • • • • • • • • • • • • • •					4. FEI Number Applied For
O Display Display Of Display						65-0175705 Not Applicable
2. Principal Place of Business 2a. Mailing Address 21						Certificate of Status Desired XIX
Suite, Apt. #, etc. Suite, Apt. #, etc. 22 27						6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
City & State						7. Is this nonprofit corporation a homeowners association?
23 28						Yes No
Zip 24	Country Zip Cou			ntry		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30.
	9. Name and Address of Current					10. Name and Address of New Registered Agent
			·	81	Name	
SHAPIRO, DAVID			ł	B2	Street A	ddress (P.O. Box Number is Not Acceptable)
123 N.W. 13TH STREET			Į			Control (107 por visit 100 por
SUITE 300			ĺ	83		
BOCA R	ATON FL 33432		-	84	City	85 Zip Code
44 5	10 Min 10	047 4500 Flexide Coast				FL FL FL FL FL FL FL FL
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.						
agent. I a	m familiar with, and accept the obliga	tions of, Section 617.0503, Flo	orida Statu	ntes.	•	
SIGNATURE,	Signature, typed or printed name of registered ager	TOWN and tills if anoticable (NO)	F - Benistered	Anno	ot elanatura re	iquired when reinstaing) DATE
12.	OFFICERS AND		13.		n aightiolore to	
TITLE	PD	DELETE	1.1 117	LE		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition
NAME	ENGELSTEIN, ALEC		1.2 NA	ME	ì	8000024880587
STREET ADDRESS	123 NW 13TH STREET #300		1.3 STF	REET #	ADDRESS	-04/14/9801047010
CITY-ST-ZIP	BOCA RATON FL		1.4 CIT	1.4 CITY-ST-		*****70.00 *****70.00 8
TRLE	VD	☐ DELETE	2.1 TIT	2.1 TITLE		Change Addition C
NAME'	ENGELSTEIN, HARRY		22 NAME		Í	
STREET ADDRESS	123 NW 13TH STREET #300			REET A	ADDRESS	
CITY-ST-ZIP	BOCA RATON FL		2. 4 CITY		T-ZIP	
TITLE	DVST	☐ DELETE	3.1 7(7			Change Addition
NAME	SHAPIRO, DAVID		3.2 NA			
STREET ADDRESS	123 NW 13TH ST, SUITE 300 BOCA RATON FL				ADDRESS	
CITY-ST-ZIP	BOOA NATUN FL	DELETÉ	3.4. CH		I-ZIP	Change Addition
NAME		E DECENT	4.1 III			C change C Roullion
STREET ADDRESS					ADDRESS	
CITY-ST-ZIP			4.4 CIT		1	
TITLE		DELETE	5.1 TiT		-211	☐ Change ☐ Addition
NAME			5.2 NAI			
STREET ADDRESS			1		ADDRESS	
CITY-ST-ZIP			5.4 CIT			10
TITLE		DELETE	6.1 TIT			Change Addition
NAME			6.2 NA	ME	}	(U 1113410)
STREET ADDRESS			6.3 STF	REET A	ADDRESS	H4113410
CITY-ST-ZIP			6.4 CIT	Y-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 of the Toggiver 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 application with an address.

Istoin Vice President

561-391-4012