FILE NOW: FILING FEE IS \$61.25

*NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 1. Corporation Name

DI ATIMA COMMINITY MARTED ARROCATION INC

PLATIN	ia community master	ASSOCIATION, INC.			
Principal Place	e of Business	Mailing Address			T TO BEIND I BUR ISSUE OFFICE BLICK FLOOR OLDER WARDLE GROUPS BEINGE BEIND OLDER
9640 PLANTINA BOYNTON FL 3 US		9640 PLANTINA AVE. BOYNTON FL 33437-2143 US			
					3. Date incorporated or Qualified 3a. Date of Last Report 05/01/1996
2. Principal Pi	lace of Business	2a. Mailing Address 26			4. FEI Number Applied For 65-0169827 Not Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired
City & State	0	City & State			6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees
Zip	Country	Zip	Cour	ntry	This corporation has liability for intangible tax under s. 199.032,
24	9. Name and Address of Curre		۱ اد		Florida Statutes Li Yes DS No 10. Name and Address of New Registered Agent
	g, realization of Walls			81 Name	M ~ 1
FRIE, AR	RTHUR			82 Street	ARTHUR FRIE Address (P.O. Box Number is Not Acceptable) GLYD PIATINA Ave
9640 PLANTINA AVE.			ŀ	or Street	9640 Platina Ave
BOYNTO	IN BEACH FL 33437		Ì	83	
			ŀ	84 CityD	Saystan Banch FL 85 Zip Code 33437
11 Pursuant	to the provisions of Sections 617.05	in 2 and 617 1508. Florida Statutes	the eh	Ove-named	
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 adigations of, Section 617.0503, Florida Statutes.					
SIGNATURE	Juliu XV			Frie	
12.	Signature, typed or printed name of registered a	igent and title if applicable. (NOTE: F ND DIRECTORS	legistered 13.	Agent signature	re required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE [PD.	DELETE	1,1 Tit		Spl V D Change X Addition
NAME	FRIE, ARTHUR		1.2 NA		MARIO ACCARdo
STREET ADDRESS	5265 F BRISATA CIRCLE			REET ADDRESS	
CITY-ST-ZIP	BOYNTON BEACH FL 3343	7		Y-ST-ZIP	Boyston Bench FL 33437
TITLE	٧ī	DELETE	2.1 TiT	LE	D. ☐ Change ☒ Addition
NAME	SPIEGEL, NORMAN		2.2 NA	ME	KATHRYN GOLDMAN 6253 I BRISATA CIRCLE
STREET ADDRESS	5133 C BRISATA CIRCLE		2.3 ST	reet address	
CITY-S1-ZIP	BOYNTON BEACH FL 3347			TY-ST-ZIP	BOYNTON BEACH FL 33427
TITLE	STD	₩ DELETE	3.1 TIT		Change Addition
NAME	BOKISH, GAIL		3.2 NA		NORMAN LEWIS 5158 D Floria Way
STREET ADDRESS	5107 E. EUROPA DR. BOYNTON FL 33437			reet address	
CITY-ST-ZIP TITLE	SD SD	DELETE	3.4. CI 4.1 TIT	TY-ST-ZIP	BOYNTON BEACH FL 33437
NAME	BANKAEE MICHANI MILI	_T ~ ~ ~	4.00		Michael Stone
STREET ADDRESS	A18-H-FHROPA DR. SI	87 H. Europa De	43 ST	REET ADDRESS	5188 E EUROPA PE
CITY-ST-ZIP	BOYNTON BEACH FL 3343	7	•	Y-ST-ZIP	BOYNTON BEACK FL 33437
TITLE	D	DELETE	5.1 TIT		Change Addition
NAME	GREEN, DAVID		5.2 NA	ME	
STREET ADDRESS	5451 C VERONA DR.		5.3 ST	REET ADDRESS	
CITY-ST-ZIP	BOYNTON BEACH FL 3343		5.4 CI	Y-ST-ZIP	
TITLE		DELETE	6.1 TIT		Change Addition
NAME			6.2 NA		
STREET ADDRESS			ŀ	REET ADDRESS	
CHY-ST-ZIP	ou portify that the information asset	ind with this filing does not qualify		Y-ST-ZIP	stated in Section 119.07(3)(i), Florida Statutes. I further certify that the
informatio	in indicated on this annual report of	r supplemental annual report is true	e and a	ccurate and	d that my signature shall have the same legal effect as if made under oath; that 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:

FILED

Mar 11 1997 8:00am

Secretary of State