FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

FILED

Apr 01 1997 8:00am

Secretary of State

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1997 DOCUMENT #

SIGNATURE:

N37478

(7)

AVIGNON VILLAS CONDOMINIUM ASSOCIATION, INC.									
Principal Plac	on of Puninees	Mailing Address							
Principal Plac	e or business	Mailing Address	Mailing Address						***************************************
C/O MR. LARI 4030 GULF OF LONGBOAT KI	F MEXICO DRIVE	4030 GULF OF MEXIC	C/O MR. LARRY STARR 4030 GULF OF MEXICO DRIVE LONGBOAT KEY FL 34228-2604						
				·		3. Date incorporated or Qualified 04/05/1990	3a. Date of 02/	Last Re 05/199	port 96
21	Place of Business	2a. Mailing Address 26				4. FEI Number 52-1735768			olied For Applicable
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				5. Certificate of Status Desired	-	3.75 Ac Fee Rec	dditional quired
City & State	e	City & State				Election Campaign Financing Trust Fund Contribution		5.00 A	
Zip	Country	Zıp	Coun	try		8. This corporation has liability for		inder s.	
24	9. Name and Address of Curr		[30]			10. Name and Address of New Re			
			1	B1 Nar	me		3	<u></u>	
MS. SHARON S. VANDER WULP KANETSKY, MOORE & DEBOER, P.A.				B2 Stre	eet Addre	ess (P.O. Box Number is Not Acceptal	ble)		
227 NO	OKOMIS AVENUE SOUTH		Ī	B3					
	E, 34284-8767			B4 City	•		FL 85	1	
11. Pursuant office or r	to the provisions of Sections 617.0 registered agent, or both, in the Starm familiar with, and accept the obline in the second s	502 and 617,1508, Florida State of Florida. Such change will gations of Section 617,0503	atutes, the aboas authorized	by the	ned corpo corporation	oration submits this statement for the pon's board of directors. I hereby acce	purpose of chan pt the appointm	iging its ient as ri	registered egistered
SIGNATURE.	Signature, typed or printed name of registered a					kd when reinstating)	DATE		
12.		AND DIRECTORS	13.	-		ADDITIONS/CHANGES TO OFFIC		ECTORS	3 IN 12
TITLE	PD			1.1 TITLE			· 🛄 0	hange	Addition
NAME	PARIKH, NIRMAL		1.2 NAA						
STREET ADDRESS	251 HILLSIDE TERRACE		1.3 STR	EET ADDRE	SS				
CITY-ST-ZIP	KINGSTON NY SD DELETE			1.4 CHY-ST-ZIP					
TITLE	SD Aiello, ralph	L. DEREIE		2.1 TITLE				Change	Addition
NAME STREET ADDRESS	35 WESCOTT ST		2.2 NAN						
CITY-ST-ZIP	OLD TARPAN NJ			2.3 STREET ADDRESS 2. 4 CITY - ST - ZIP					
TITLE	TD	DELETE	3,1 TITL			r.0	110	hange	Addition
NAME	WELCH, III M E	/- -	3.2 NAM			TOHN ALBERTO 35- DEARBUN DR.		/	- Laurion
STREET ADDRESS	2601 SOUTH INDIAN MOU	IND ROAD	3.3 STR	EET ADDRE	iss	35- DEARBAN DK.			
CITY-ST-ZIP	BLOOMFIELD HILLS MI		3.4. C)T	Y-ST-ZIP	0	LA TARRAN. N.J. 076	ን ፓ		
TITLE		DELETE	4.1 TITL	.E				hange	Addition
NAME			4. 2 NA	ME					
STREET ADDRESS			4.3 STR	EET ADDRE	:ss				
CITY-ST-ZIP		□ No. trr		Y-ST-ZIP					
TITLE		☐ DELETE	5.1 TITL		İ		□ 0	hange	L Addition
NAME CIDECT ADDOCCO			5.2 NAN						
STREET ADDRESS			1	EET ADORE	.SS				
CITY - ST - ZIP TITLE				5.4 CITY-ST-ZIP 6.1 TITLE				hange	Addition
NAME			6.2 NAN				L v	range.	L ADDITION
STREET ADDRESS				eet adore	:50				
CITY-ST-ZIP				Y-5T- <i>Z</i> IP	~				
14 I do hereh	by certify that the information supp	lied with this filing does not g	uelify tor the e	vomotio	on stated	in Section 119.07(3)(i), Florida Statute	s. I further certi	fy that th	ne
l am an ol appears i	ifficer or director of the corporation in Block 12 or Block 18 if changed.	or the receiver or trustee employ on an axachment with an	addraes	ecute th	and that r	my signature shall have the same legs as required by Chapter 617, Florida S	al effect as if ma Statutes; and the	ide unde at my na	ər oath; that ime