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May 19 1997 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1997



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

DOCUMENT # N37748 (3)

1. Corporation Name

CONGRESS OFFICE PARK PROPERTY OWNERS ASSOCIATION
INC.

Principal Place of Business

1540 LATHAM ROAD
WEST PALM BEACH FL 33409

Mailing Address

1540 LATHAM ROAD
WEST PALM BEACH FL 33409-5113



3. Date Incorporated or Qualified
04/20/1990

3a. Date of Last Report
05/01/1996

2. Principal Place of Business

21 4300 Catalfumo Way

Suite, Apt. #, etc.

22

City & State

23 Palm Beach Gardens, FL

Zip

24 33410

Country

25 U.S.A.

2a. Mailing Address

26 4300 Catalfumo Way

Suite, Apt. #, etc.

27

City & State

28 Palm Beach Gardens, FL

Zip

29 33410

Country

30 U.S.A.

4. FEI Number

65-0268036

Applied For

Not Applicable

5. Certificate of Status Desired



\$8.75 Additional
Fee Required

6. Election Campaign Financing

Trust Fund Contribution



\$5.00 May Be
Added to Fees

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

CATALFUMO, DANIEL S.
1540 LATHAM ROAD
WEST PALM BEACH FL 33409

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

4300 Catalfumo Way

83

84

Palm Beach Gardens FL

85 Zip Code

33410

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE ☐ DELETE

NAME
DPS
CATALFUMO, DANIEL S.
STREET ADDRESS
1540 LATHAM ROAD
CITY-ST-ZIP
WEST PALM BEACH FL

TITLE ☐ DELETE

NAME
DS
BALLARD, JANE
STREET ADDRESS
1540 LATHAM ROAD
CITY-ST-ZIP
WEST PALM BEACH FL

TITLE ☐ DELETE

NAME
DV
JACOBY, JAMES E.
STREET ADDRESS
1540 LATHAM ROAD
CITY-ST-ZIP
WEST PALM BEACH FL

TITLE ☒ DELETE

NAME
D
BERRIS, JEFFREY M.
STREET ADDRESS
1540 LATHAM ROAD
CITY-ST-ZIP
WEST PALM BEACH FL

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

TITLE ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☒ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

14. I do 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 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
Daniel S. Catalfumo 4/23/97 561-694-2000

Date

Daytime Phone # 0040763

CR2E037 (9/96)