NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham Secretary of State

DIVISION OF CORPORATIONS

1996

N43589 DOCUMENT #

(3)

PORT ANTIGUA AT CORAL BAY VILLAGE ASSOCIATION, I

Principal Place of Business 3141 VISTA DEL MAR

Mailing Address

MARGATE FL 33063

3141 VISTA DEL MAR MARGATE FL 33063

US				05				3. Date Incorporated or Qualified 05/23/1991	3a. Date of Last Report 03/29/1995		
2.	. Principal Place of Busine	ess		a. Mailing Address				4. FEI Number			Applied For
!1			26	2001 W. Sa	mp]	le I	łd.	65-0404362		\perp	Not Applicable
22	Suite, Apt. #, etc.		27	Suite, Apt. #3etc Suite 305				5. Certificate of Status Desired			75 Additional se Required
3	City & State		1	City & State		1, I	`1	Election Campaign Financing Trust Fund Contribution			.00 May Be Ided to Fees
24	Zip	Country 25	29	Zip 33064	30	Countr	ward	This corporation has liability for in Florida Statutes	ntangible tax Yes 🗶 f		rs. 199.032,
_	9. Name	and Address of Current	Reg	stered Agent		T		10. Name and Address of New Re	gistered A	gent	
						8	Name	Howard Torn			
URBANOWSKI, PAT 3141 VISTA DEL MAR					8:	Street Addr	kress(P.O. Box Number is Not Acceptable) 2001 W. Sample Road, Suite 305				
	MARGATE FJ. 330					В	3				

Pompano Beach 11. Pursuant to the provisions of Sections 617.0500 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office

or register	ed agent or hoth, in the State of	of Floatia, Such change was auth	orized by the corporation's board	of directors	 I hereby accept 	the appointment as re	₃gistered a
familiar wit	th, and advent the obligations of	Sacion 617.0503. Florida Statu	orized by the corporation's board utes.			~/	/ .
JOHN HIRES WY	in, and according conganity of	1	Howard	Torn	2 / m	5/10	1a 1
SIGNATURE	Hurry	Illum	nowaru	TOTIL	3/ I	2/10/	7 G
SIGNATURE .		/	ALCITE Districtment Assert monature regulared to	where no netabovit		DATE	

12.	OFFICERS AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	D	1.1 TITLE	$.$ P \cdot D Change \Box Addition
NAME	KRAUSE, HOWARD	1.2 NAME	E. Ruth Smith
STREET ADDRESS	3141 VISTA DEL MAR	1.3 STREET ADORESS	2001 W. Sample Road, Suite 305
CITY-ST-ZIP	MARGATE FL	1.4 CITY-ST-ZIP	Pompano Beach, FL 33064
TITLE	D	21 TITLE	Thange Addition
NAME	URBANOWSKI, PAT	2.2 NAME	Charle: Mishner
STREET ADDRESS	6578 BUENN VISTA DRIVE	2.3 STREET ADDRESS	2001 W. Sample Road, Suite 305
CITY-ST-ZIP	MARGATE FI	2 4 CITY - ST - ZIP	Pompano Beach, FL 33064
TITLE	DELETE	3 1 TITLE	S/T D Change Addition
NAME	LABRADOR, YANIK D.	3 2 NAME	Howard Torn
STREET ADDRESS	3141 VISTA DEL MAR	3.3 STREET ADDRESS	2001 W. Sample Road, Suite 305
CITY-ST-ZIP	MARGATE FL	34 CITY-S1-ZIP	Pompano Beach, FL 33064
TITLE	DELETE	41 TITLE	☐ Change ☐ Addition
NAME		4. 2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE	DELETE	5 1 TITLE	Change Addition
NAME		52 NAME	800001857398 -06/11/9601014021
STREET ADDRESS		5 3 STREET ADORESS	
CITY - ST - ZIP		5 4 CITY - S1 - ZIP	***61.25
TITLE	DELETE	61 TITLE	Change Addition

6 4 CITY - S1 - 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 effector of the corporation of 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 attach first with an address.

61 TITLE

62 NAME

6.3 STREET ADDRESS

SIGNATURE:

TITLE

NAME

STREET ADDRESS

b name of Bigning officer or Director Howard Torn

DELETE

5/10/96

954 974-0060