FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

,

DOCUMENT # 1. Corporation Name	N47054	(4)
BEACH VILLAS OF N. INC.	DEERFIELD CONDOMINIUM	ASSOCIATIO

Principal Place of Business Mailing Address 257 ROYAL PALM WAY 1907 NE 2ND ST **BOCA RATON FL 33432** DEERFIELD BEACH FL 33441 3. Date Incorporated or Qualified 01/27/1992 05/01/1995 4. FEI Number Applied For 2. Principal Place of Business 2a. Mailing Address 65-0311876 Not Applicable 26 21 \$8.75 Additional Suite, Apt. #, etc. Suite, Apt. #, etc. 5. Certificate of Status Desired Fee Required 27 22 City & State \$5.00 May Be 6. Election Campaign Financing City & State Trust Fund Contribution Added to Fees 28 23 8. This corporation has liability for intangible tax under s. 199.032, Country Ζıρ Country Zip ☐ Yes ☐ No Florida Statutes 30 25 29 24 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name GALLUZZO, VITTORIO Street Address (P.O. Box Number is Not Acceptable) 82 257 ROYAL PALM WAY 63 **BOCA RATON FL 33432** Zip Code 84 City 85

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 little if a	colicatio (NOTE B	egistered Agent signature re	equired when reinstaling)	DATE	-
12.	OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12			
TITLE	OP	□ DELETE	1.1 TITLE		☐ Change	☐ Addition
NAME	GALLUZZO, VITTORIO	_	1.2 NAMÉ			
STREET ADDRESS	257 ROYAL PALM WAY		1.3 STREET ADDRESS			
CITY-ST-ZIP	BOCA RATON FL		14 CITY - ST - ZIP		74403	
TITLE	D	DELETE	21 TITLE	MOIS FEDERAL	Change	☐ Addition
NAME	JANINE, LORRAINE		2 2 NAMÉ	BOCA RATION,	TIA 33432	
STREET ADDRESS	1907 NE 2 STREET		2 3 STREET ADDRESS	PO. BOX 7096_		_
CITY-ST-ZIP	-DEERFIELD BEACH FL 33441		2 4 CITY - ST - ZIP	BEEN RATION, 11	-A - 3343 1	
TITLE	D	DELETE	3 1 TITLE		Change Change	Addition Addition
NAME	VANDERWARY, JOHN C		3.2 NAME	MICHAEL PELSER	Taue	
STREET ADDRESS	834 S FED HWY		3 3 STREET ADDRESS	1 1 1		
CITY-ST-ZIP	DERFIELD BEACH FL 33441		3.4 CITY-ST-ZIP	CANTON, MASS	02021-2	
TITLE		DELETE	4.1 TITLE		☐ Change	Addition
NAME			4. 2 NAME			
STREET ADDRESS			4.3 STREET ADDRESS	l l		
ÇITY - ST - ZIP			4.4 CITY - ST - ZIP			
TITLE		DELETE	5 1 TITLE	roccati		■ Addition
NAME			5.2 NAME *	5000018 -06/20/960	2003U3 NN22011	
STREET ADDRESS			5 3 STREFT ADDRESS	***61.50	01055 011	
CITY-ST-ZIP			5 4 CITY - ST - ZIP	***************************************		
TITLE		DELETE	6 1 TITLE		☐ Change	Addition Addition
NAME			62 NAME			
STREET ADDRESS			63 STREET ADDRESS	4-19	7/2 AV	
CITY-ST-ZIP			6.4 CITY - ST - ZIP	0 1 7	I W U K	an I Cadhaa
	are at a second of the second	طونصوبه ببالمصاصب اصبيحت مسانقي	ad and door not out	alify for the exemption stated in Section	∟i i i 9 dzcislik). Eločida Statut	es. Frurtner

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 furnier 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 cath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Opapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

NTED NAME OF SIGNING OFFICER OR DIRECTOR