FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 APR 28 PM 6:53
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N47706** **(9)**

1. Corporation Name

ABBEY PARK TOWNHOUSE PROPERTIES HOMEOWNER'S ASSO C. INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
P.O. BOX 18296 WEST PALM BEACH FL 33416	P.O. BOX 18296 WEST PALM BEACH FL 33416

3. Date Incorporated or Qualified: 03/05/1992
3a. Date of Last Report: 05/01/1994
4. FEI Number: 65-0316298 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25 Palm Beach	Zip 29 / Country 30 Palm Beach

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
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
COOK, HELEN 1777 ABBEY RD WEST PALM BEACH FL 33415	81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City **FL** 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE X Helen B. Cook
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	1.1 TITLE		☐ Change ☐ Addition
NAME	COOK, HELEN	1.2 NAME		
STREET ADDRESS	1777 ABBEY RD	1.3 STREET ADDRESS		
CITY-ST-ZIP	WEST PALM BEACH FL	1.4 CITY-ST-ZIP		
TITLE	V	2.1 TITLE	V	☒ Change ☐ Addition
NAME	BROADAWAY, GARY	2.2 NAME	WELCH, CINDI	
STREET ADDRESS	1889 ABBEY RD	2.3 STREET ADDRESS	1863 Abbey Rd.	
CITY-ST-ZIP	WEST PALM BEACH FL	2.4 CITY-ST-ZIP	West Palm Beach, FL 33415	
TITLE	SD	3.1 TITLE	SD	☒ Change ☐ Addition
NAME	WELCH, CINDI	3.2 NAME	SINOT, LILLIAN D.	
STREET ADDRESS	1863 ABBEY RD	3.3 STREET ADDRESS	1781 Abbey Rd.	
CITY-ST-ZIP	WEST PALM BEACH FL	3.4 CITY-ST-ZIP	West Palm Beach, FL 33415	
TITLE	TD	4.1 TITLE	TD	☒ Change ☐ Addition
NAME	ANDREWS, RICHARD, JR.	4.2 NAME	SINOT, WAYNE	
STREET ADDRESS	1809 ABBEY ROAD	4.3 STREET ADDRESS	1849 Abbey Rd	
CITY-ST-ZIP	WEST PALM BEACH FL	4.4 CITY-ST-ZIP	West Palm Beach, FL 33415	
TITLE	M	5.1 TITLE	M	☐ Change ☐ Addition
NAME	OWENS, LINDA	5.2 NAME	BROADWAY, GARY	
STREET ADDRESS	1787 ABBEY RD.	5.3 STREET ADDRESS	1889 Abbey Rd.	
CITY-ST-ZIP	WEST PALM BEACH FL	5.4 CITY-ST-ZIP	West Palm Beach, FL 33415	
TITLE	M	6.1 TITLE		☐ Change ☐ Addition
NAME	FINNAN, HILDA	6.2 NAME		
STREET ADDRESS	1829 ABBEY RD.	6.3 STREET ADDRESS		
CITY-ST-ZIP	W. PALM BCH. FL	6.4 CITY-ST-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)(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: X HELEN B. COOK Helen B. Cook 4-24-95 407-439-6534
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0040706