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NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

N47834

(9)

BON BERGER, INC. Principal Place of Business Mailing Address 140 N.E. 56 CT. FORT LAUDERDALE FL 33334 3613 SW 14TH ST 3. Date Incorporated or Qualified FT. LAUDERDALE FL 33312 03/12/1992 4. FEI Number 65-0326385 Not Applicable 2. Principal Place of Business 2a. Malling Address \$8.75 Additional M 5. Certificate of Status Desired <u>140 NE</u> Fee Required Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees City & State 7. Is this nonprofit corporation a homeowners association? ☐ Yes 26 Country 8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes 20 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent DONJOIE, JOCELYN E Street Address (P.O. Box Number is Not Acceptable) 140 N.E. 56 COURT FT LAUDERDALE FL 33334 City Zip Code 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, typed or printed name of registered agent and title if applicat (NOTE: Registered Agent signature re 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 OFFICERS AND DIRECTORS 13. TITLE DELETE Change Addition 1.1 TITLE DONJOIE, JOCELYN E 1 2 MAME NAME 3613 SW 14TH ST STREET ADDRESS 1.3 STREET ADDRESS FT LAUDERDALE FL CITY-ST-ZIP 1.4 CHTY-ST-ZIP DELETE Change ☐ Addition TITLE 2.1 TITLE VOLMAR, MONTCLAIR 2.2 NAME NAME 242 NW 43RD CT STREET ADDRESS 2.3 STREET ADDRESS POMPANO BEACH FL CITY-ST-ZIP 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE JEAN, WANDA 3.2 NAME NAME 3604 SW 13TH CT. STREET ADORESS 3.3 STREET ADORESS FT. LAUDERDALE FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE ☐ Change Addition TITLE 4.1 TITLE NAME 4.2 NAME STREET ADDRESS 4.3 STREET ADDRESS CITY-ST-ZWP 4.4 CITY - ST - ZIP DELETE TITLE 5.1 TITLE Change Addition NAME 52 NAME STREET ADDRESS **5.3 STREET ADDRESS** CITY-ST-ZIP 5.4 CITY-ST-ZIP ☐ DELETE Change Addition 6.1 TITLE 6.2 NAME NAME STREET ADDRESS **6.3 STREET ADDRESS** 6.4 CITY-ST-ZIP

14. I 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 shaffing 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 regalized 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: SALENZARUHI DELOUIREG

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FILED

May 05 1998 8:00am

Secretary of State