

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N93000000543 (9)

1. Corporation Name

BAY WEST TOWNHOMES HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business

Mailing Address

% TOTALBANK
2720 CORAL WAY
MIAMI FL 33145-0678

% TOTALBANK
2720 CORAL WAY
MIAMI FL 33145-0678

3. Date Incorporated or Qualified

02/09/1993

3a. Date of Last Report

02/08/1995

2. Principal Place of Business

21 C/O ROBERT GILBERT, PRES.

2a. Mailing Address

26 422 N.W. 7TH STREET

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 City & State

27 City & State
28 MIAMI, FL

23 Zip

Country

29 Zip

Country

24

25

29

30

4. FEI Number

65-0387806

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

SCHLOSBERG, DAVID I
2720 CORAL WAY
MIAMI FL 33145

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 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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

D
HEFFERNAN, WILLIAM J
351 NE 105TH ST
MIAMI SHORES FL 33138

☒ DELETE

11 TITLE
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP

D/P
ROBERT GILBERT
422 N.W. 7TH STREET
MIAMI, FLORIDA

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

D
LOPEZ, PETRONIO
15025 SW 63RD ST
MIAMI FL 33193

☒ DELETE

21 TITLE
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP

D/V
LEFRANCE PHILLIPE
434 N.W. 8TH STREET
MIAMI, FLORIDA

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

D
SCHLOSBERG, DAVID I
620 NE 50TH TERRACE
MIAMI FL 33137

☒ DELETE

31 TITLE
32 NAME
33 STREET ADDRESS
34 CITY - ST - ZIP

D/S
LIDIA M. ARZU
417 N.W. 7TH STREET
MIAMI, FLORIDA

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

41 TITLE
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP

D/AS
MYRTLE GREEN
432 N.W. 8TH STREET
MIAMI, FLORIDA

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

51 TITLE
52 NAME
53 STREET ADDRESS
54 CITY - ST - ZIP

D/T
ADELA CORVALON
419 N.W. 7TH STREET
MIAMI, FLORIDA

☐ Change ☒ Addition

TITLE
NAME
STREET ADDRESS
CITY - ST - ZIP

☐ DELETE

61 TITLE
62 NAME
63 STREET ADDRESS
64 CITY - ST - ZIP

500001858735
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☐ Change ☐ Addition

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 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 or changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

ROBERT GILBERT, PRESIDENT & DIRECTOR MARCH 16, 1996

Date

Daytime Phone #

CR2E037 (12/95)