## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

N93000004347 (1)

## NEW HOPE CONDOMINIUM ASSOCIATION, INC.

			-			
Principal Place of Business		Mailing Address			Beit Chris unite Meblik tratt Minit ennt 1821	
9921 SW 97 COURT MIAMI FL 33176		9921 SW 97 COURT MIAMI FL 33176-2812				
					3. Date Incorporated or Qualified 09/28/1993	3a. Date of Last Report 05/01/1996
2. Principal Pl	ace of Business	2a. Mailing Address 26	•		4. FEI Number 65-0585680	Applied For Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.		5. Certificate of Status Desired	S8.75 Additional Fee Regulred	
City & State		City & State		Election Campaign Financing     Trust Fund Contribution	\$5.00 May Be Added to Fees	
Zip	Country		Country	'	8. This corporation has liability for	intangible tax under s. 199.032,
24	25 9. Name and Address of Curre		30	<del> </del>	Florida Statutes  10. Name and Address of New Re	Yes No
<u></u>	9. Name and Address of Curre	ut uadistatan Maut	81	Name	10. Name and Address of New Ro	Bistelen Wästir
GRIFFEY	, RONALD L		82		ddress (P.O. Box Number is Not Acceptate	ole)
9921 SW 97TH COURT MIAMI FL 33176			83			
MIAMI PL	. 331/0		84	City		85 Zip Code
				,		
11. Pursuant l	to the provisions of Sections 617.05 egistered agent, or both, in the State	02 and 617.1508, Florida Statutes e of Florida. Such change was au	s, the above thorized by	e-named corpo	orporation submits this statement for the pration's board of directors. I hereby acceptation	ourpose of changing its registered of the appointment as registered
	m familiar with, and accept the oblig	gations of, Section 617.0503, Flori	ida Statutei	3.		
SIGNATURE _	Signature, typed or priviled name of registered ag	jent and title if applicable (NOTE:	Registered Age	ent elgnature re	quired when reinstating)	DAYE
12.	OFFICERS AN	ND DIRECTORS	13.		ADDITIONS/CHANGES TO OFFIC	CERS AND DIRECTORS IN 12
THILE	PD	☐ DELETÉ 1.170				☐ Change ☐ Addition
NAME	GRIFFEY, RONALD L		1.2 NAME	Į.		
STREET AUDRESS	9921 SW 97TH COURT		1.3 STREET	ADDRESS		
CITY-ST-ZIP	MIAMI FL 33176	III ocurre	1.4 CITY - S 2.1 TITLE	T-ZIP		The state of the s
TITLE	STD	<del></del>		1		Change  Addition
NAME	GRIFFEY, MARY T		2.2 NAME			
STREET ADORESS	9921 SW 97TH COURT		2.3 STREET	•		
CITY-ST-ZIP TITLE	MIAMI FL 33176 VD	DELETE	2. 4 CITY -: 3.1 TITLE	ST-ZIP		☐ Change ☐ Addition
NAME	KRISTEN, FIORE M	L. DELETE	3.1 THE			Change C Addition
STREET ADDRESS	9921 SW 97 CT		3.3 STREET	ADDRESS		
CITY-S1-ZIP	MIAMI FL		3.4. CITY-			
TITLE	MIXWII T.L.	DELETE	4.1 TITLE	51-21		Change Addition
NAME		<u> </u>	4. 2 NAME			
STREET ADORESS			4.3 STREET	ADDRESS		
CITY-\$1-ZIP			4.4 CITY-S	1		
TITLE		DELETE	5.1 TITLE			☐ Change ☐ Addition
NAME		—	5.2 NAME	1		
STREET ADDRESS			5.3 STREET	ADDRESS		
CITY - ST - ZIP			5.4 CITY - S			
TITLE		☐ DELETE	6.1 TITLE			Change Addition
NAME			6.2 NAME			· ·
STREET ADDRESS			6.3 STREET	ADDRESS		

CITY-ST-ZIP

14. I do 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 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

SIGNATURE AND TYPED OF PRINTED HAME OF SIGNING OFFICER OR DIRECTOR

April 11, 1997

305-271-6343

**FILED** 

Apr 18 1997 8:00am

Secretary of State

Daytime Phone # 0033056