## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

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DOCUMENT # N9400000307 (8)

KULIAN	COMPLEY	<b>CONDOMINIUM</b>	ASSOCIATION	INC.
DIFFERM	UUIVIELEA	COMPONING	MOODOIMHOIN	IIIV.

11941 U.S. HWY. ONE NORTH NORTH PALM BEACH FL 33408  3. Date Incorporated or Qualified O1/20/1994 O1/23/1995  2. Principal Place of Business 2a. Mailing Address 25. Certificate of Status Desired City & State City & State City & State Country Country Country Country Country  11941 U.S. HWY. ONE NORTH NORTH PALM BEACH FL 33408  3a. Date of Last Report O1/23/1995  4. FEI Number 65-6463065 Not Applied For Not Applied For Source, Apt. #, etc. 5. Certificate of Status Desired Fee Required City & State City & State Country Coun	KILLIAN	COMPLEX CONDOMINIO	M ASSUCIATION, INC.							
NORTH PALM BEACH FL 33408    Part   Palm Beach FL 33408   NORTH PALM BEACH FL 33408   S. Date incorporated or Qualified   Sa. Date of Last Report O1/20/1894   O1/20/1895   Control of O1/20/1895   Control o1/20/1895   Co	Principal Place of Business Mailing Address						<b>en</b> didiri (			
Principal Paice of Business   2x   Mailing Address   3x   4. FEI Number   65-6463065   5x   5x   5x   5x   5x   5x   5x										
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27	2. Principa: Pla 21	ce of Business	<del>-</del>				!		<del> </del>	
26	Suite, Apt. #	——————————————————————————————————————				5. Certificate of Status Desired	\$			
Section   Sect	City & State		<del></del>							
### STATE ADDRESS   Name   ### STREET ADDRESS   STREET AD	Ζιρ <b>24</b>	25	29					99.032,		
### Street Ackiness (P.O. Box Number is Not Acceptable)  ### Only		9. Name and Address of Curre	nt Registered Agent		04	Maria	10. Name and Address of New Re	gistered Ager	it	
11941 U.S. HWY. ONE NORTH   NORTH PALM BEACH FL 33408				Ľ	•					
NORTH PALM BEACH FL 33408						Street Addre	ess (P.O. Box Number is Not Acceptable	e) 		
Page	NORTH I	PALM BEACH FL 33408		ľ	B3					
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  12. OFFICERS AND DIRECTORS  13. ADDITIONS CHANSES TO OFFICERS AND DIRECTORS IN 12.  ITLE  PTSD  OFFICERS AND DIRECTORS IN 12.  ITLE  PTSD  VILSON, J.L.  12. NAME  VILSON, J.L.  12. NAME  VILSON, J.L.  13. REPETADORESS  OTH-ST-ZIP  NORTH PALM BEACH FL. 33408  14. CITY-ST-ZIP  NORTH PALM BEACH FL. 33408  14. CITY-ST-ZIP  ONORTH PALM BEACH FL. 33408  24. CITY-ST-ZIP  NORTH PALM BEACH FL. 33408  24. CITY-ST-ZIP  NORTH PALM BEACH FL. 33408  25. REVETADORESS  OTH-ST-ZIP  NORTH PALM BEACH FL. 33408  26. CITY-ST-ZIP  NORTH PALM BEACH FL. 33408  27. CITY-ST-ZIP  NORTH PALM BEACH FL. 33408  28. CITY-ST-ZIP  NORTH PALM BEACH FL. 33408  29. CITY-ST-ZIP  NORTH PALM BEACH FL. 33408  20. CITY-ST-ZIP  NORTH PALM BEACH FL. 33408  20. CITY-ST-ZIP  THE  D. Change Addition  AME  STREET ADDRESS  OTH-ST-ZIP  THE  DELETE  DELETE  STREET ADDRESS  OTH-ST-ZIP  THE  Change Addition  Addition  ANDE  STREET ADDRESS  OTH-ST-ZIP  THE  DELETE  STREET ADDRESS  OTH-ST-ZIP  THE  DELETE  STREET ADDRESS  OTH-ST-ZIP  THE  DELETE  STREET ADDRESS  OTH-ST-ZIP  THE  Change Addition  Addition  ANDE  STREET ADDRESS  OTH-ST-ZIP  THE  DELETE  STREET ADDRESS  OTH-ST-ZIP  THE  Change Addition  Addition  ADDITIONS CHANSES TO OFFICERS AND DIRECTORS IN 12  ADDITIONS CHANSES  ADDITIONS CHANSES  ADDITIONS CHANSES TO OFFICERS AND DIRECTORS IN 12  ADDITIONS CHANSES  ADDITION				1	84	City		FL B	Zip	Code
12	or registere	ed agent, or both, in the State of Flo	rida. Such change was authorize	s, the aboved by the co	e na orpo	amed corpora ration's board	ation submits this statement for the purp d of directors. I hereby accept the appo	nose of changin intment as regis	g its restered a	gistered office agent. I am
13.   ADDITIONS*CHANGES TO OFFICERS AND DIRECTIONS IN 12	SIGNATURE _									
DELETE					agent	signature required			FOTOE	RS IN 12
MAME   WILSON, J.L.   12 NAME   13 STREET ADDRESS   11941 U.S. HWY. ONE NORTH   13 STREET ADDRESS   11941 U.S. HWY. ONE NORTH   14 CITY-ST-ZIP					F		ADDITIONS OF ANGES TO CITY			
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City - St - Zip			TH			ADDRESS				
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NAME   WILSON, O.G.   22 AAME								Cr	ange	Addition
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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: \_\_

STATULES ON .

1/2 4/91

409-775 VOW

R2F037 (12/95)