FILE NOW: HEING FEE IS \$61.25

NONPROFIT *****SORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Morthom

Secretary of State DIVISION OF CORPORATIONS

	1	99	8	

Principal Place of Business % GREENLITE PROP. MGMT.

CITY-ST-ZIP

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

TITLE

NAME

N94000001 (5)

SAN REMOCONDOMINUM II ASSOC, INC

% GREENLITE PROP. MGMT.

BOCA RATON FL 33481 BOCA RATON FL 33431			3/2/94	Į.			
			4. FEI Number	Applied For			
1			65-0399835	Not Applicable			
Principal Place of Business 1	2a. Mailing Address		5. Certificate of Status Desired	\$8.75 Additional Fee Regulred			
Suite, Apt. #, etc.	Suite, Apt. #, etc.		Election Campaign Financing Trust Fund Contribution	\$5.00 May Be			
City & State	City & State		TOOL TO THE CONTRIBUTION	Added to Fees			
23	28		7. Is this nonprofit corporation a homeown Z Yes	ers association?			
Zip Country	Zip	Country	8. This corporation owes or has paid the o	urrent year Intangible			
24 25	29 30	0	Personal Property Tax due June 30.	Yes No			
9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent							
		81 Name	laine M Cats	OS Atty			
車が 利=1		82 Street Addr	ress (P.O. Box Number is Not Abceptable)	O PACK POL			
		83		a history			
		المحا	Te 210				
* Proceeding	,	84 250C	A PATON F				
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 flage 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 original statutes.							
SIGNATURE	CLAINE ELAINE	M.GATSON	4-21	- 48			
Signature, typed or printed name of registered agent and little if applicable. (NOTE: Registered Agent signature required when reinstaling) 12. OFFICERS AND DIRECTORS 13. ADDITIONS CHANGES TO DEFICERS AND TIRECTORS							
TITLE IPD OFFICERS A	DELETE	1.1 TITLE	ADD-HOUS, CHRESES TO CATHOLINE A	Change Addition			
		1.2 NAME		Contract Con			
1,000	CT	1.3 STREET ADDRESS					
STREET ADDRESS 12620-1 Tibele Chin	7£ C!						
TITLE TO THE	DELETE	1.4 CITY-ST-ZIP		Change Addition			
1 · · · · · · · · · · · · · · · · · · ·	C) vice it	2.1 VIILE 2.2 NAME		Clarife Clarificity			
Trpost = John	. 41.	1					
STREET ADDRESS & NO UIA ROMANO		2.3 STREET ADDRESS					
CITY-SI-ZIP BOCA RATION /	DELETE	2. 4 CITY - ST - ZIP 3.1 TITLE	·	Change			
TITLE UP SEED BY	DECETE			Chounte Changing			
NAME BLACKER ROBET	T -	3.2 NAME					
STREET ADDRESS 12583 REMO CT 2	-	3.3 STREET ADDRESS					

CITY-ST-ZIP 6.4 CITY-ST-ZIP

4.3 STREET ADDRESS

5.3 STREET ADORESS

6.3 STREET ADDRESS

5.4 CITY-ST-ZIP

4.4 CITY-ST-ZIP

3.4. CITY-ST-ZIP

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

DELETE

700002539877

-05/29/98---01001---000

Change

Change

Addition

Addition

FILED

May 28 1998 8:00am

Secretary of State

3. Date Incorporated or Qualified