

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # N95000004600 (1)

1. Corporation Name

MIRAMAR GARDEN CONDOMINIUM APARTMENTS, INC.



Principal Place of Business

60 VENETIAN DR.
DELRAY BEACH FL 33483

Mailing Address

60 VENETIAN DR.
DELRAY BEACH FL 33483

3. Date Incorporated or Qualified
09/26/1995

3a. Date of Last Report

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-1028411

Applied For

Not Applicable

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

5. Certificate of Status Desired

☐ \$8.75 Additional
Fee Required

City & State

City & State

23

28

6. Election Campaign Financing
Trust Fund Contribution

☐ \$5.00 May Be
Added to Fees

24

25

Country

29

30

Country

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

DIONNE, CLAUDE L.C.A.M
60 VENETIAN DR.
DELRAY BEACH FL 33483

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

Claude Dionne

MANAGER

2-14-96

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME HUGHES, JOHN
STREET ADDRESS 170 BAY RD.
CITY-ST-ZIP OCEAN CITY NJ 08226

☐ DELETE

1.1 TITLE PD
1.2 NAME HUGHES, JOHN W.
1.3 STREET ADDRESS 60 VENETIAN DR N-201
1.4 CITY-ST-ZIP DELRAY BEACH FL, 33483

☒ Change ☐ Addition

TITLE VD
NAME DIGGINS, BETTY
STREET ADDRESS 60 VENETIAN DR., N-105
CITY-ST-ZIP DELRAY BEACH FL 33483

☐ DELETE

2.1 TITLE VD
2.2 NAME DIGGINS, BETTY
2.3 STREET ADDRESS 60 VENETIAN DR N-105
2.4 CITY-ST-ZIP DELRAY BEACH FL 33483

☒ Change ☐ Addition

TITLE SD
NAME ALLEN, SHIRLEY
STREET ADDRESS 80 VENETIAN DR., S-102
CITY-ST-ZIP DELRAY BEACH FL 33483

☐ DELETE

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE TD
NAME MURTAGH, BOB
STREET ADDRESS 60 VENETIAN DR., N-305
CITY-ST-ZIP DELRAY BEACH FL 33483

☐ DELETE

4.1 TITLE TD
4.2 NAME MURTAGH, ROBERT
4.3 STREET ADDRESS 60 VENETIAN DR N-305
4.4 CITY-ST-ZIP DELRAY BEACH FL 33483

☒ Change ☐ Addition

TITLE D
NAME GALLOWAY, GLORIA
STREET ADDRESS 80 VENETIAN DR., S-104
CITY-ST-ZIP DELRAY BEACH FL 33483

☐ DELETE

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE D
NAME GIORDANO, JOHN
STREET ADDRESS 60 VENETIAN DR., N-303
CITY-ST-ZIP DELRAY BEACH FL 33483

☐ DELETE

6.1 TITLE D
6.2 NAME BRONNELL, SALLY
6.3 STREET ADDRESS 60 VENETIAN DR S-206
6.4 CITY-ST-ZIP DELRAY BEACH, FL 33483

☐ 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 if changed, or on an attachment with an address.

SIGNATURE:

ROBERT MURTAGH Robert Murtagh
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)