FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N9500005466

1. Corporation Name

EMBASSY DRIVE NEIGHBORHOOD ASSOCIATION, INC.

Principal Place of Business

Mailing Address

1830 EMBASSY DRIVE W. PALM BEACH FL 33401 1830 EMBASSY DRIVE W. PALM BEACH FL 33401

FILED Apr 14, 1999 8:00 am Secretary of State

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	,				
Principal Place of Business					3. Date Incorporated or Qualifed 11/16/1995
21					4. FEI Number Applied For
¬ " " " , " " , " " , " " , " " , " , "					65-0634477 Not Applicable
City & State City & State					5. Certificate of Status Desired
23		28	Countr		
Zip	Country Zip				6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
24 25 29 :			0 Trust Fund Contribution Added to Fees 10. Name and Address of New Registered Agent		
	9. Name and Address of Current	Registered Agent	81	Name	
	•)") .vaina	· · · · · · · · · · · · · · · · · · ·
EDGAR, CHARLES W III			82 Street Address (P.O. Box Number is Not Acceptable)		
3300 PGA BLVD.			_		<u> </u>
SUITE 500			83	3	•
PALM BEACH GARDENS FL 33410			84	City	85 Zip Code
	•	•		1	
office or r	to the provisions of Sections 617.0502 egistered agent, or both, in the State o m familiar with, and accept the obligation	f Florida. Such change was autr	nonzea by	/ tne corp	ed corporation submits this statement for the purpose of changing its registered reporation's board of directors. I hereby accept the appointment as registered
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable. (NOTE: Ro	egistered Age	ent signature	re required when reinstating) DATE
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	STD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	GERTH, SAUL		1.2 NAME		
STREET ADDRESS	1739 EMBASSY DRIVE, UNIT 10	3	1.3 STREE	T ADDRESS	ss
CITY-ST-ZIP	W. PALM BEACH FL 33401		1.4 CITY-	ST-ZIP	· · · · · · · · · · · · · · · · · · ·
TITLE	VD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	BOLTON, CAROLE		2.2 NAME		
STREET ADDRESS			2.3 STREE	ET ADDRESS	ss
CITY-ST-ZĪP	and the first and the second s		2.4 CITY-	ST-ZIP	•
TITLE	PD	DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	FELDMAN, PETER		3.2 NAME		
STREET ADDRESS			3.3 STREE	ET ADDRESS	ss
	W. PALM BEACH FL 33401		3.4, CITY-		
TITLE	W. FAGW DEACHTE GOTO!	□ DELETE	4.1 TITLE	01-2-	Change Addition
NAME	· ·	_	4. 2 NAME	:	
				- Et address	ss
STREET ADDRESS			1		
CITY-ST-ZIP	<u> </u>	☐ DELETE	4.4 CITY- 5.1 TITLE	01-LIP	☐ Change ☐ Addition
TITLE			5.1 MAME		
NAME]		1	ET ADDRESS	88
STREET ADDRESS			5.4 CITY-		· .
CITY-ST-ZIP		[] DELETE	6.1 TITLE		☐ Change ☐ Addition
TITLE & C	23年 经收益的基本证明 2003	☐ DELETE			Li Change Li Addition
NAME: A AR		•	6.2 NAME		
STREET ADDRESS	VO STA		L.	ET ADDRESS	SS
	I .	\sim	E 4 CITY	CT 7ID	1

CITY-ST-ZIP

14. I 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 tropped 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, with all other like empowered.

SIGNATURE:

TISIGMATUNE REQUIRED

GSY 511 V Daytime Phone #