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**FILED**  
**May 03, 1999 8:00 am**  
**Secretary of State**

05-03-1999 90079 039 \*\*\*\*61.25

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**NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999**



FLORIDA DEPARTMENT OF STATE  
**Katherine Harris**  
Secretary of State  
DIVISION OF CORPORATIONS

**DOCUMENT # N96000005364**

1. Corporation Name

**ADDISON GREEN AT ABERDEEN ASSOCIATION, INC.**

Principal Place of Business

1499 W. PALMETTO PARK RD.  
STE. 200  
BOCA RATON FL 33486

Mailing Address

951 BROKEN SOUND PKWY.  
STE. 250  
BOCA RATON FL 33487



4/23/20 - 9/11/20 - 07

2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

10/18/1996

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

4. FEI Number

65-0835510

Applied For

Not Applicable

23 City & State

27 City & State

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

24 Zip Country

28 Zip Country

6. Election Campaign Financing  
Trust Fund Contribution ☐

**\$5.00** May Be  
Added to Fees

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**COMMUNITY ASSOCIATION SERVICES INC.  
951 BROKEN SOUND PKWY.  
STE. 250  
BOCA RATON FL 33487**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE ☒ DELETE  
NAME **PSTD**  
STREET ADDRESS **KODSI, DANIEL**  
CITY-ST-ZIP **1499 W. PALMETTO PARK RD. STE. 200**  
**BOCA RATON FL 33486**

1.1 TITLE **PD** ☒ Change ☐ Addition  
1.2 NAME **Merle D'Addario**  
1.3 STREET ADDRESS **1690 S. Congress Ave. Suite 200**  
1.4 CITY-ST-ZIP **Delray Beach, Florida 33445**

TITLE ☒ DELETE  
NAME **VD**  
STREET ADDRESS **GIVEN, MARK**  
CITY-ST-ZIP **1499 W. PALMETTO PARK RD. STE. 200**  
**BOCA RATON FL 33486**

2.1 TITLE **VSTD** ☒ Change ☐ Addition  
2.2 NAME **Jo Ann Levy**  
2.3 STREET ADDRESS **1690 S. Congress Ave. Suite 200**  
2.4 CITY-ST-ZIP **Delray Beach, Florida 33445**

TITLE ☒ DELETE  
NAME **D**  
STREET ADDRESS **KODSI, ISSAC**  
CITY-ST-ZIP **1499 W. PALMETTO PARK RD. STE. 200**  
**BOCA RATON FL 33486**

3.1 TITLE ☒ Change ☐ Addition  
3.2 NAME **Jerry Ruskin**  
3.3 STREET ADDRESS **1690 S. Congress Ave. Suite 200**  
3.4 CITY-ST-ZIP **Delray Beach, Florida 33445**

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

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

TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 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 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, with all other like empowered.

SIGNATURE:

**SIGNATURE REQUIRED**  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNED OFFICER OR DIRECTOR

**Jo Ann Levy, Secretary**

4/29/99

561-274-2000 x280

Date

Daytime Phone #

CR2E037 (1/98)