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Mar 16 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N97000000027 (9)**

1. Corporation Name

VILLAGE PALMS CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business 13200 SW 128 STREET SUITE E1 MIAMI FL 33186	Mailing Address 13200 SW 128 STREET SUITE E1 MIAMI FL 33186
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3. Date Incorporated or Qualified

01/02/1997

4. FEI Number

65-0765702

Applied For

Not Applicable

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

5. Certificate of Status Desired

☐

**\$8.75 Additional
Fee Required**

6. Election Campaign Financing
Trust Fund Contribution

☐

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

7. Is this nonprofit corporation a homeowners association?

☐

Yes No

8. This corporation owes or has paid the current year Intangible
Personal Property Tax due June 30.

☐

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**HENDRISKE, NELSON
13200 SW 128 STREET
SUITE E1
MIAMI FL 33186**

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	PD	1.1 TITLE	
NAME	HENDRISKE, NELSON J	1.2 NAME	
STREET ADDRESS	13200 SW 128 ST, STE E1	1.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33186	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	
NAME	BELLON, LEOPOLDO	2.2 NAME	
STREET ADDRESS	13200 SW 128 ST, STE E1	2.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33186	2.4 CITY-ST-ZIP	
TITLE	STD	3.1 TITLE	
NAME	NOTHEIS, WALTER M	3.2 NAME	
STREET ADDRESS	13200 SW 128 ST, STE E1	3.3 STREET ADDRESS	
CITY-ST-ZIP	MIAMI FL 33186	3.4 CITY-ST-ZIP	
TITLE		4.1 TITLE	
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE		5.1 TITLE	
NAME		5.2 NAME	
STREET ADDRESS		5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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.

SIGNATURE:

[Signature]

3/6/98

305-255-7122

CR2E037 (10/97)