FILE NOW: FILING FEE IS \$61.25

NONPROFIT **CORPORATION** ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1. Corporatio	MENI# N9/O	00000986 (6)			
FLORIC	DA NATIONAL COMMUNIT	TY DEVELOPMENT, INC.			
Principal Place of Business		Malling Address	Malling Address		L TORNING! BUT SATIS (BOIN BOIN) BOLLY BOTHS ODNII BOLKY BOKKO TOTAL TOTAL TOTAL
4516 NW STH COURT DELRAY BEACH FL 33445		4516 NW 5TH COURT DELRAY BEACH FL 33445			3. Date Incorporated or Qualified 02/18/1997
					4. FEI Number Applied For Not Applied For Not Applicable
2. Principal P	lace of Business	2a. Mailing Address			
1		26 0754 W. 1	26 0754 W. AMantic 8		5. Certificate of Status Desired S8.75 Additional Fee Required
		Suite, Apt. #_ etc.	, etc		6. Election Campaign Financing \$5.00 May Be
22			· · · · · · · · · · · · · · · · · · ·		Trust Fund Contribution Added to Fees
City & State	8	28 State	Bec	ach 1	7. Is this nonprofit corporation a homeowners essociation?
Zip	Country	2ip 33(16Q 34	Countr		8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
24	25 25 Name and Address of Curr	100 (3.7(-2.7)	<u>" </u>	917.	Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent
			81	Name	
TRIMM, N C 4516 NW 5TH COURT DELRAY BEACH FL 33445			82 Street Address (P.O. Box Number is Not Acceptable) 83		
			84	City	FL 85 Zip Code
11 Purculant	to the provisions of Sections 617.0	502 and 617 1508 Florida Statutae	the abov	ro nomed oo	progration submits this statement for the purpose of changing its registered
office or n agent. I as SIGNATURE	egistered agent, or both, in the Sta m familiar with, and accept the obt	ate of Florida. Such change was autiligations of, Section 617.0503, Florid	horized b la Statute	y the corpor. s.	ation's board of directors. I hereby accept the appointment as registered
12.	Signature, typed or printed name of registered a	agent and title if applicable. (NOTE: R AND DIRECTORS	egistered Ac	ent signature req	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	PD	DELETE	1.1 TITLE		Change Addition
NAME	TRIMM, N C	- Control	1.2 NAME	- 1	E outside E volume
STREET ADDRESS	4516 NW 5TH COURT			T ADDRESS	
CITY-ST-ZIP	DELRAY BEACH FL 33445	N DEADLLES ADLLE		ST-ZIP	
TITLE	T	DELETE 2.1 To		U. 4H	Change Additlo
NAME	LEAKEY, DEBBIE S		2.2 NAME	i i	_ · ·
STREET ADDRESS	4516 NW 5TH COURT			T ADDRESS	A
CITY-ST-ZIP	DELRAY BEACH FL 33445		2.4 CITY-	1	•
TITLE	S	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	JACKSON MONICA		3.2 NAME	i	

11820 49TH ST NO STREET ADDRESS 5.3 STREET ADDRESS ROYAL PALM BEACH FL 33411 CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change Addition TITLE 6.1 TITLE MARCELLE, LARRY 6.2 NAME 1327 NW 87TH TERRACE STREET ADDRESS 6.3 STREET ADDRESS **CORAL SPRINGS FL 33071** CITY-ST-ZIP 6.4 CITY-ST-ZIP

3.3 STREET ADDRESS

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

3.4. CITY-ST-ZIP

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

DELETE

DELETE

14. Thereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Fiorida 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 coporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 13 if or produce the receiver of the control of

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME

TITLE

NAME

213 LAKE POINT DRIVE STE 214

FORT LAUDERDALE FL 33309

DEERFIELD BEACH FL 33442

HANNA, RAYMOND

507 NW 1ST TERRACE

DUNCOMBE, WENDY

Addition

Addition

Change

Change

FILED

Feb 16 1998 8:00am

Secretary of State