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

DOCUMENT # N9700004532 (4)

FRENCH-AMERICAN BUSINESS ASSOCIATION OF THE PALM BEACHES, INC.

Principal Place of Business Mailing Address							l	i immiliät did iditi idäli agitt #4	114 MERES MAISS B.	#1 56 1	11196 TITLE 1787 7881
777 SOUTH FLAGLER DRIVE			777 SOUTH FLAGLER DRIVE				Date Incorporated or Qualific	nd			
SUITE 600 WEST			SUITE 800 WEST				08/11/1997	, 			
WEST PALM BEACH FL 33401			WEST PALM BEACH FL 33401			4	FEI Number			Applied For	
							1				Not Applicable
2. Principal Place of Business			2a. Malling Address			~	. Certificate of Status Desired		\$8.	75 Additional	
21			26			`	Commodite of Gladus Dosmed	<u>با</u>	Fe	e Required	
Suite, Apt. #, etc.			Suite, Apt. #, etc.			6	i. Election Campaign Financing	_		00 May Be	
22			[27]				Trust Fund Contribution				
City & State			City & State			7	7. Is this nonprofit corporation a homeowners association?				
23 7in		Country	Zip Country				☐ Yes ☐ No				
Zip	<u> </u>		├ ──		лиу	,	8. This corporation owes or has paid the current year Intangible				
24	9. Name and Address of Currer		29 30 30 Stered Agent		1			Personal Property Tax due June 30.			
	9 , 140.110	and Addition of Daily	on nogotos Agon		81	Name		, ttamo grid Addiose of from	Hogistolog	rigonic	
ATIBES MALES											
	JBER, JAMES A			82 Street A			Address (P.O. Box Number is Not Accep	otable)		
	SOUTH FLAGI		83							 	
SUITE 800 WEST WEST PALM BEACH FL 33401						L					
WEST FALM BEACH PL 33401					84	City			FL	85	Zip Code
11. Pure	suant to the provis	sions of Sections 617.05	502 and 617.1508, Florida Stat	tutes, the a	bove	e-named	corporat	on submits this statement for the		- 1 1	ng its registered
offic age	e or registered ag nt. I am familiar w	gent, or both, in the Sta rith, and accept the obli	to of Florida. Such change wa igations of, Section 617.0503,	s authorize Florida Sta	d by tutes	y the corp s.	poration's	board of directors. I hereby ac	cept the app	cointmen	it as registered
_						-					
SIGNATURE Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registere						ent signature	required why		DATE		
12.		OFFICERS A	ND DIRECTORS	13.				ADDITIONS/CHANGES TO OF	FICERS AND		
TITLE	D		L DELETE	1.1 T	ITLE		D/P	4		🔀 Chai	nge 🕍 Addition
NAME		BRIAN, PHILLIPE		1.2 NAME			BRIA	m, philippe			
STREET ADD		ilean avenue		1.3 \$	TREET	ADDRESS	170	CHICAMA MAR			
CITY-ST-Z		EACH FL 33480	☐ DELETE	1.4 CITY+ST-ZIP		IT-ZIP	1_*	n Bency, FL 334	180	-	
TITLE	D	— V		2,7,1,1,22			D/V			Char	nge 🔀 Addition
NAME	HIRSH,			2.2 N	AME			SH, NICOLE			
STREET ADI		AYERS COURT		2.3 \$	TREET	ADDRESS	248	2 PLAYERS COL)RT	1	
CITY-ST-Z		1 BEACH FL 33414	——————————————————————————————————————			ST-ZIP		bun Bedech Fl	23414	<u> </u>	<u> </u>
TITLE	D		☐ DELETE	3.1 TI			DE	/T		2 Char	nge 🔀 Addition
NAME	STUBER, JAMES A			3.2 N			310	Ber, James A S. Eugler Dr	-	\n/	
STREET ADD							777	PALM IS CH. PL	3711 A	• •	
CITY-ST-Z	P W PALM	BEACH FL 33401	☐ DELETE			ST-ZIP	V •	FIFCH TE CII, IC	->401	77	nge Addition
TITLE			☐ DELETE	4.1 TI		[:			☐ Char	ine Thy Manieu
NAME				4.2 N		- 1					
STREET ADD						ADDRESS					
CITY-ST-Z	P		□ bilete			iT-ZIP	ļ ,			Char	nge Addition
TITLE	1		☐ DELETE	5.1 TI			:			L CHR	Me The Worldool
NAME	1			5.2 N			:				
STREET ADD				1		ADDRESS					
CITY-ST-ZI	<u> </u>		☐ DELETE		TY-S	1 - ZIP				Char	nge Addition
TITLE			☐ Atrelt	6.1 TI						L_ Uniar	iño FTT vankingu
NAME				6.2 N							
STREET ADD	HRESS			6.3 \$1	REET	ADDRESS					

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.

CIGNATURE.

Dameed Partie Homes A. Straber

4/28/00

581-820-

FILED

May 15 1998 8:00am

Secretary of State

3R2E037 (10/97)