

FILE NOW: FILING FEE IS \$61.25

FILED  
Apr 23, 1999 8:00 am  
Secretary of State

04-23-1999 90078 040 \*\*\*\*61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



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

DOCUMENT # N98000001413

1. Corporation Name

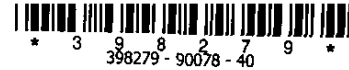
THE RITZ CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

30 NE 3RD STREET  
FORT LAUDERDALE FL 33301

Mailing Address

30 NE 3RD STREET  
FORT LAUDERDALE FL 33301



2. Principal Place of Business

21 836 Poinsett Dr.

2a. Mailing Address

26 Suite, Apt. #, etc.

3. Date Incorporated or Qualified

02/02/1998

4. FEI Number

65-0857717

Applied For

Not Applicable

22 City & State

23 Cocoa, FL 32922

27 City & State

28

24 Zip

25 Country  
USA

29 Zip

30 Country

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

9. Name and Address of Current Registered Agent

BADMAN, DAVID M  
7820 PETERS ROAD  
SUITE E-103  
PLANTATION FL 33324

10. Name and Address of New Registered Agent

81 Name ERIC J. DORER, P.A.

82 Street Address (P.O. Box Number is Not Acceptable)

83 30 N.E. 3rd Street

84 City Ft. Lauderdale

FL

85 Zip Code 33301

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 Eric J. Dorer, Pres.

4/19/99

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

(NOTE: Registered Agent signature required when registering)

DATE

12. OFFICERS AND DIRECTORS

TITLE PSTD  
NAME DORER, ERIC  
STREET ADDRESS 30 NE 3RD STREET  
CITY-ST-ZIP FORT LAUDERDALE FL 33301

TITLE VD  
NAME LAMPERT, HARVEY  
STREET ADDRESS 30 NE 3RD STREET  
CITY-ST-ZIP FORT LAUDERDALE FL 33301

TITLE D  
NAME HOWARD, NICOLE  
STREET ADDRESS 30 NE 3RD STREET  
CITY-ST-ZIP FORT LAUDERDALE FL 33301

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

TITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

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

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

6.1 TITLE  
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 for 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 in an attachment with an address, with all other like empowered.

SIGNATURE:

SIGNATURE REQUIRED DORER, PRES.

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (1/1/98)