FILE NOW: FILING FEE AFTER MAY 1ST IS \$550.00

PROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 222763

Corporation Name

BROWNSTONE COOPERATIVE APARTMENTS INC

Principal Plac	ce of Business	Mailing Address						
10178 COLLINS AVENUE 10178 COLLINS AVENUE BAL HARBOUR BAL HARBOUR								
MIAMI BEACH FL 33154 MIAMI BEACH FL 33					DO NOT WRITE IN THIS SPACE			
						Incorporated or Qualifed		
						<u> 20/1959 </u>		
2. Principal F	Place of Business	2a. Mailing Address				Number	ļi	pplied For
21		26			59-	0868107		ot Applicable
Suite, Apt #, etc		Suite, Apt #, etc			5, Cert	ifcate of Status Desired	+	Additional leguired
22	·	27						<u> </u>
City & Sta	te	City & State				tion Campaign Financing t Fund Contribution		May Be to Fees
Zip	Country	Zip	Count	ry	8 This	corporation owes the current year	r Intangible	
24	25	29	30	,		sonal Property Tax	☐ Yes	□No
241	9. Name and Address of Cu		-	.=	10. Nan	10. Name and Address of New Registered Agent		
11. Pursuant office or	registered agent, or both, in the S am familiar with, and accept the o	7.0502 and 607 1508, Florida Statutes State of Florida. Such change was aut bligations of, Section 607.0505, Florid	horized b	3 4 City ve-named cory the corporat	noration sub	mits this statement for the purpos of directors. I hereby accept the a	e of changing its ppointment as re	Code s registered egistered
SIGNATURE	Signature, typed or printed name of registers	ed agent and title if applicable INOTE	Registered Ag	jent signature requir				
12.	OFFICER	S AND DIRECTORS	13.		ADDI	TIONS/CHANGES TO OFFICERS		
TITLE	ST	☐ DELETE	11TITLE	1 1 TITLE			Change	Acdition
NAME	WELSTEAD, ROSEMARY		1.2 NAME					
STREET ADDRESS	10178 COLLINS AVE		1 3 STRE	ET ADDRESS				
CITY-ST-ZIP	BAL HARBOUR, FL 00000		14 CITY	ST-ZIP				
TITLE	VP	☐ DELETE	2 1 TITLE				Change	Acdition
NAME	YESULAITIS, JOHN		2 2 NAME					
STREET ADDRESS	10.000 001 1010 415		2 3 STRE	ET ADDRESS				
CITY-ST-ZIP	BAL HARBOUR, FL 00000		2.4 CITY	ST-ZIP				
TITLE	6	[] DELETE	3 1 1171 6				Change	Acdition

14. Thereby 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 607. Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or or an attachment with an address, with all other like empowered.

3.3 STREET ADORESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

64 CITY-ST-ZIP

4.4 CITY-ST-ZIP

5 4 CITY - ST- ZIP

34 CITY-ST-ZiP

4 : TITLE

4 2 NAME

5 1 TITLE

5.2 NAME

61 TITLE

6.2 NAME

☐ DELETE

DELETE

□ DELETE

SIGNATURE:

NAME

TITLE

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

POWER, MARY A

10178 COLLINS AVE

FRADERA, RICARDO

10178 COLLINS AVE

10178 COLLINS AVE

BAL HARBOUR FL

JACOBI, JOEL

BAL HARBOUR, FL 00000

BAL HARBOUR FL

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

☐ Change

☐ Change

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Mar 16, 1999 8:00 am Secretary of State

03-16-1999 90121 032 ***150.00

CR2E034 (11/98)