

FILE NOW: FILING FEE IS \$61.25

FILED

Jan 17 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION  
ANNUAL REPORT  
1997



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 710227 (0)

1. Corporation Name  
THE ARROWWOOD CONDOMINIUM, INC.



Principal Place of Business: 900 TALLWOOD AVENUE, HOLLYWOOD FL 33021, US  
Mailing Address: 900 TALLWOOD AVENUE, HOLLYWOOD FL 33021-7972, US

3. Date Incorporated or Qualified: 01/20/1966  
3a. Date of Last Report: 01/31/1996

2. Principal Place of Business: 21 Same  
2a. Mailing Address: 26 Same  
4. FEI Number: 59-1365518  
5. Certificate of Status Desired: [X] \$8.75 Additional Fee Required  
6. Election Campaign Financing: [ ] \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes: [ ] Yes [X] No

9. Name and Address of Current Registered Agent: TERLIZZESE, JAMES, 900 TALLWOOD AVE #309, HOLLYWOOD FL 33021  
10. Name and Address of New Registered Agent: 81 Name: Same, 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: \_\_\_\_\_ (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	[ ] Change [ ] Addition
NAME	TERLIZZESE, JAMES	1.2 NAME	
STREET ADDRESS	900 TALLWOOD AVENUE 309	1.3 STREET ADDRESS	Same
CITY - ST - ZIP	HOLLYWOOD FL	1.4 CITY - ST - ZIP	
TITLE	VTD	2.1 TITLE	[ ] Change [ ] Addition
NAME	GOLDBERG, CHARLES	2.2 NAME	
STREET ADDRESS	8920 S.W. 20TH PLACE	2.3 STREET ADDRESS	Same
CITY - ST - ZIP	FT LAUDERDALE FL	2.4 CITY - ST - ZIP	
TITLE	SD	3.1 TITLE	[ ] Change [ ] Addition
NAME	BUGROS, EULISSES	3.2 NAME	
STREET ADDRESS	2930 OSLO AVENUE	3.3 STREET ADDRESS	Same
CITY - ST - ZIP	COOPER CITY FL	3.4 CITY - ST - ZIP	
TITLE	[ ] DELETE	4.1 TITLE	[ ] Change [ ] Addition
NAME		4.2 NAME	
STREET ADDRESS		4.3 STREET ADDRESS	
CITY - ST - ZIP		4.4 CITY - ST - ZIP	
TITLE	[ ] DELETE	5.1 TITLE	[ ] Change [ ] Addition
NAME		5.2 NAME	600002062846
STREET ADDRESS		5.3 STREET ADDRESS	-01/21/97--01010--029
CITY - ST - ZIP		5.4 CITY - ST - ZIP	***70.00
TITLE	[ ] DELETE	6.1 TITLE	[ ] Change [ ] Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	01-17-97 02/16
CITY - ST - ZIP		6.4 CITY - ST - ZIP	

14. I do 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: \_\_\_\_\_ DATE: 1-2-97 DAYTIME PHONE: 966-6677

CR2E037 (9/96)