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Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 713401

1. Corporation Name

THE FOUR SEASONS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

333 SUNSET DRIVE
FT. LAUDERDALE FL 33301

Mailing Address

333 SUNSET DRIVE
FT. LAUDERDALE FL 33301



2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21		26		09/29/1967	
Suite, Apt. #, etc.		Suite, Apt. #, etc.		4. FEI Number	
22		27		59-1196724	
City & State		City & State		5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	
23		28		6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees	
Zip Country		Zip Country		24 25 29 30	

9. Name and Address of Current Registered Agent

MELENZ, JOHN D.
333 SUNSET DRIVE #1101
FT. LAUDERDALE FL 33301

10. Name and Address of New Registered Agent

81 Name

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	SERO	1.1 TITLE	P
NAME	PIAN, DIRAN M MD	1.2 NAME	Seropian, Diran M., M.D.
STREET ADDRESS	333 SUNSET DRIVE	1.3 STREET ADDRESS	333 Sunset Drive
CITY-ST-ZIP	FT LAUDERDALE FL 33301	1.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33301
TITLE	V	2.1 TITLE	D
NAME	ROTH, JOHN	2.2 NAME	Roth, John
STREET ADDRESS	333 SUNSET DRIVE	2.3 STREET ADDRESS	333 Sunset Drive
CITY-ST-ZIP	FT LAUDERDALE FL	2.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33301
TITLE	D	3.1 TITLE	VP
NAME	GOLNICK, LEON M	3.2 NAME	Golnick, Maxine
STREET ADDRESS	333 SUNSET DRIVE	3.3 STREET ADDRESS	333 Sunset Drive
CITY-ST-ZIP	FT LAUDERDALE FL 33301	3.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33301
TITLE	S	4.1 TITLE	D
NAME	BROADHURST, BARBARA	4.2 NAME	Broadhurst, Barbara J.
STREET ADDRESS	333 SUNSET DR	4.3 STREET ADDRESS	333 Sunset Drive
CITY-ST-ZIP	FT LAUDERDALE FL	4.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33301
TITLE	D	5.1 TITLE	S
NAME	COOPERMAN, RICHARD	5.2 NAME	Grimes, James
STREET ADDRESS	333 SUNSET DRIVE	5.3 STREET ADDRESS	333 Sunset Drive
CITY-ST-ZIP	FT LAUDERDALE FL	5.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33301
TITLE	T	6.1 TITLE	D
NAME	MELENZ, JOHN D	6.2 NAME	Rosenthal, Joan W.
STREET ADDRESS	333 SUNSET DR	6.3 STREET ADDRESS	333 Sunset Drive
CITY-ST-ZIP	FT LAUDERDALE FL 33301	6.4 CITY-ST-ZIP	Ft. Lauderdale, FL 33301

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, with all other like empowered.

SIGNATURE:

[Signature]
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

John D. Mendez, Treasurer 3/19/99 463-0644

Date

Daytime Phone #

CR2E037 (1/98)