FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT**



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1997 DOCUMENT #

(6)

MELALEUCA GARDENS CONDOMINIUM. INC.

FILED Apr 23 1997 8:00am Secretary of State

Principal Plac	e of Business	Mailing Address				-			11011 01011 1E01	
C/O PHILIP J. POUKISH 5141 W OAKLAND PK BLVD LAUDERDALE LAKES FL 33313		C/O PHILIP J. POUKISH 5141 W OAKLAND PK BLVD LAUDERDALE LAKES FL 33313-1589			3. Date incorporated or Qualified	30 Do	to of Last F	Report		
						3. Date Incorporated or Qualified 03/17/1970	3a. Da	04/26/19	96	
2. Principal Place of Business 2a. Mailing Address						4. FEI Number	Applied For			
21		26			59-1372747	,		ot Applicable		
Sulte, Apt.		Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required				
City & State	0	City & State				Election Campaign Financing Trust Fund Contribution	\$5.00 May Be Added to Fees			
Zlp	Country Zip			intry		8. This corporation has liability for intangible tax under s. 199.032,				
24	25 29 30 9. Name and Address of Current Registered Agent			Florida Stalutes Yes						
 	9. Name and Address of Currer	nt Registered Agent		81	Name	10. Name and Address of New Re	gistered /	gent		
DOI IKIGI	1, PHILIP J.			\Box					·	
	OAKLAND PK BLVD			82	Street Addre	ess (P.O. Box Number is Not Acceptal	ole)			
	DALE LAKES FL 33313			83				~		
				84	City			85 Zip	Code	
44 Durawant	to the provinces of Continue C17 050	00 and 617 1600. Florida Plat.	don the el		nomed anna	pration submits this statement for the p	FL	252222	ita sasista ad	
l office or r	egistered agent, or both, in the State m familiar with, and accept the oblig	i of Florida. Such change was	authorize	d by	the corporation	on's board of directors. I hereby acce	ot the app	ointment as	registered	
SIGNATURE .	Signature, typed or printed name of registered age	174 H C C (100	TE D (steer		nt signature require		DATE			
12.	_ 	D DIRECTORS	13.	о мре	nt sifnistnin ledone	ADDITIONS/CHANGES TO OFFIC		DIRECTO	RS IN 12	
TITLE	8	DELETE	1.170	TLE				Change	Addition	
NAME	weitz, selma		1.2 N	AME						
STREET ADDRESS	5141 W. OAKLAND PARK BLVD		1.3 S	1.3 STREET ADDRESS						
CITY-ST-ZIP	LAUDERDALE LKS, FL 00000			1.4 CITY-ST-ZIP				T 201	The same	
TITLE	D LI DELETE			2.1 TITLE				Change		
NAME	GLASSER, GEROGE 5141 W OAKLAND PK BLVD		•	2.2 NAME						
STREET ADDRESS CITY-ST-ZIP	LAUDERDALE LAKE FL			2.3 STREET ADDRESS 2.4 CITY-ST-ZIP						
TITLE	TD DELETE			31 TITLE				Change	Addition	
NAME	GETZLEK, IRENE			3.2 NAME				-		
STREET ADDRESS	514 1 O. P. B.			3.3 STREET ADDRESS						
CITY-ST-ZIP	LAUDERDALE FL		3.4. C	ITY-S	T - ZIP					
TITLE	PD	☐ DELETE	4.1 TI	TLE				Change	Addition	
NAME	WEITZ, IRVING		4. 2 N			·				
STREET ADDRESS	5141 O.P.B	•			Address					
CITY-ST-ZIP	LAUDERDALE LAKES, F00000			TY - S1	r-zip			T 05	A delition	
TITLE NAME	FEUERSTEIN, EDWARD	DELETE	5.1 TI		1			Change	Addition	
i i	5141 W OAKLAND PK BLVD		5.2 N		2010004					
STREET ADDRESS CITY-ST-ZIP	LAUDERDALE LKS, FL 00000				ADDRESS					
TITLE	VP				1-4IF			Change	Addition	
NAME	ROBINSON, W.M.	- Procis	6.2 N					المراهد حي		
STREET ADDRESS	5141 W. OAKLAND PK.BLVD.				ADDRESS					
CITY-ST-ZIP LAUDERDALE LKS. FL			1	ITY-SI	ì					
44 4 4 4 4 4		1 11 11 11 11	(1) J. (1)			1- O- (1 - 440 02/0)/(1 Et. 14 O) (1	1.0			

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 of trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Black 13 if changed, or on an affact mention in the receiver of the rece