FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(6)

THE MAINLANDS OF TAMARAC, NINTH SECTION, INC.

Principal Place	of Business	Mailing Address			L IRBeit annan sinit Illian sulis stati	Bar armie Arfit Arbir arbir Biast Mister Imis
7112 NW 58TH	ST	7112 NW 58TH STREET				
TAMARAC FL 33	3321	TAMARAC FL 33321-5731				
US		U\$		•	3. Date incorporated or Qualified	3a. Date of Last Report
					12/22/1970	02/08/1996
2. Principal Pla	ace of Business	2a. Mailing Address			4. FEI Number	Applied For
4		26			59-1447291	Not Applicable
Suite, Apt #	f, etc.	Suite, Apt. #, etc.			5. Certificate of Status Desired	\$8.75 Additional Fee Required
City & State	· · · · · · · · · · · · · · · · · · ·	City & State			6. Election Campaign Financing	
23		28			Trust Fund Contribution	\$5.00 May Be Added to Fees
Zip	Country	Zip	Cou	ntry	8. This corporation has liability for	
24	25	29	30		Florida Statutes	Yes No
	9. Name and Address of Curre	nt Registered Agent		1	10. Name and Address of New Re	glatered Agent
				81 Name	EFF DESILETS	
	STON, RICHARD	82 Street Add		dress (P.O. Box Number is Not Acceptate	ole)	
	58 STREET		ļ	83 7 //	5 NW 57 Co	uer
TAMARA	C FL 33321			63		
				84 City	MARAC	FL 85 Zip Code 9332/
11. Pursuant t	o the provisions of Sections 617.05	02 and 61Z-1508. Florida Statu	tes the at	ove-named co	rporation submits this statement for the r	ourpose of changing its registered
office or re	egistered agent, or both, in the state	of Florida. Such change was	Authorizet	by the corpor	rporation submits this statement for the pation's board of directors. I hereby acce	ot the appointment as registered
	n familiar with, and accept the and)		1/27/97
SIGNATURE _	Signature, typed or printed name of register it as	ent and title if applicable (NO	TE: Registered	Agent signature req	ulred when reinstating)	DATE
12.		ID DIRECTORS	13.		ADDITIONS/CHANGES TO OFFICE	
TITLE	P	▼ DELETE	1.1 T(VACILATE ROHA	Change M Addition
NAME	HUDDLESTON, RICHARD		1.2 NA	ME	lesilets, geff 115 NW 57 ct.	
STREET ADDRESS	7413 NW 58TH ST		F	1.00	AMARAC, FL 3331	, ,
CITY-ST-ZIP	TAMARAC FL VD	DELETE	1.4 CI 2.1 TI		HMHNAC , 1 C 335	☐ Change ☐ Addition
TITLE NAME	TISDALE, HARRY	- Detter	2.2 N/			
STREET ADDRESS	7103 NW 57TH DR			REET ADDRESS		i
CITY-S1-ZIP	TAMARAC FL			ITY-ST-ZIP		
TITLE	SD	DELETE	3.1 TI		P	Change Addition
NAME	SNYDER, CAROL	·	3.2 N	, — ,	AGGERTY, TIMOTHY	አ.
STREET ADDRESS	5720 NW 73D AVE		3.3 S1	REET ADDRESS	304 NW 5742	. :
CITY - ST - ZIP	TAMARAC FL		3.4. C	TY-ST-ZIP 7	AMARAC, FL 3337	
TITLE	TD	DELETE	4.1 Ti		TD ROTHA	Change Addition
NAME	JOHNSEN, DORIS		4.2 N	AME	FELDMAN, BEXIHA	l
STREET ADDRESS	5711 NW 72ND AVE			REET ADDRESS	7112 NW 58 CT.	21
CITY-ST-ZIP	TAMARAC FL	DELETE		TY-ST-ZIP	AMARAC, FL 333	Change Addition
TITLE	d Gulotta, Joseph	Deterie	5.1 Ti 5.2 N	1		
NAME OXDEEX ADDRESS	7011 N W 58 ST					
STREET ADDRESS	TAMARAC FL			REET ADDRESS Ty-St-Zip		
CITY-ST-ZIP TITLE	IF OTH WIN I L	DELETE	6.1 TI			Change Addition
NAME			6.2 N	1		
STREET ADDRESS				REET ADDRESS		
CITY-ST-ZIP				TY-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 97

FILED

Feb 04 1997 8:00am

Secretary of State