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 #

725304

(0)

GATELAND VILLAGE CONDOMINIUM, INC.

FILED Feb 12 1997 8:00am Secretary of State

 		IBI FIBIL BI	

Principal Place of Business		Mailing Address	Mailing Address		T I MATHE FARME LIBRAT WITHER STATE WHAT BEAUT		
APT 9-I 3777 N.W. 78TI	LI AVE	APT 9-I 3777 N.W. 78TH AVE.					
HOLLYWOOD F			3/// N.W. /81H AVE. HOLLYWOOD FL 33024-8341				
				3. Date Incorporated or Qualified 01/18/1973	3a. Date of Last Report 03/15/1996		
2. Principal P	Place of Business NW 78th Avenue	2a. Mailing Address	26 8051 W. NcNab Rd.		Applied For		
<u></u>					Not Applicab		
Suite, Apt.	#, etc.	Suite, Apt. #, etc.		5. Certificate of Status Desired	\$8.75 Additional Fee Required		
City & Stat	to	City & State		6. Election Campaign Financing			
	wood, FL	Mamaaa	Tamarac, FL		\$5.00 May Be Added to Fees		
Zip 3302		Zιρ	Country	B. This corporation has liability for			
24 3302	[25]		30 USA		Yes X No		
	9. Name and Address of Cur	rent Registered Agent	ad Nome	10. Name and Address of New Ro			
			81 Name Ami	mbassador Community Management, Inc.			
	M PROPERTY MANAGEMENT,I	NC.	82 Street	82 Street Address (P.O. Box Number is Not Acceptable) 8051 W. MCNab Rd.			
	SUNSET STRIP		83	or ma mendo ku.			
SUNRIS	E FL 33322		00				
			84 City		FL 85 Zip Code 33321		
11 Purcuant	to the provisions of Rections 617 (0502 and 617 1508 Florida Statute	Tall	narac,			
office or	registered agent, o both, in the St	ate of Florida. Such change was a	authorized by the corp	corporation submits this statement for the oration's board of directors. I hereby acce	pt the appointment as registered		
	am ramiliar with and accept the co	1/2/.					
SIGNATURE	Signature, typed or printed name of registered	agent and title if applicable. (NOTE	Teve Culot Registered Agent signature	ta. President Amba	ssador Comm.Mg		
12.		AND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFI	CERS AND DIRECTORS IN 12		
TITLE	PD	X DELETE	1.1 TITLE	V/D	Change X Additi		
NAME	FIORINI, ROBERTA		1,2 NAME	Sorochak, Margaret			
STREET ADDRESS	37777 NW 78TH AVE., APT	T 9- 1		3777 NW 78th Ave.,			
CITY-ST-ZIP	HOLLYWOOD FL 33024		****	Hollywood, FL 330			
TITLE	VPD	☐ DELETE	2.1 TITLE	P/D	Change (Additi		
NAME	GLIDER, BERNICE		2.2 NAME				
STREET ADDRESS	37777 NW 78TH AVE., API	9-1	2.3 STREET ADDRESS	Apt. 12-E			
CITY - ST - ZIP	HOLLYWOOD FL 33024	N PRIETE	2 4 CITY-ST-ZIP		T Ac		
TITLE	SD STORES	★ DELETE	31 TITLE	T/D	Change 🙀 Additi		
NAME	DEFREITAS, CAROL		32 NAME	Bertinetti, Elizab	acn ant e e		
STREET ADDRESS	37777 NW 78TH AVE., API	1 8-1	3.3 STREET ADDRESS	3777 NW 78th Ave., Hollywood, FL 330	24		
CITY-ST-ZIP	HOLLYWOOD FL 33024	X DELETE	3.4. CITY - ST - ZIP		Change X Additi		
TITLE	TD NUTT MICHAEL	EN DETEIF	4.1 TITLE	S/D Campolyngo Neil	The custoffe (P.) Money		
NAME DEDCCT ADDRESS	NUTT, MICHAEL		4.2 NAME	Campolungo, Neil 3777 NW 78th Ave.,	Ant 4-D		
STREET ADDRESS	3777 NW 78 AVE APT 78 HOLLYWOOD FL 33024		4.3 STREET ADDRESS	Hollywood, FL 330			
CITY-ST-ZIP TITLE	D HOLLTWOOD PL 33024	X DELETE	4.4 CITY - ST - ZIP 5.1 TITLE	D D	Change X Additi		
NAME	GROSS, LOUIS	and which	5.2 NAME	DeLaossa, Rodney	Print Asserted FEET LINEIR		
	3777 NW 78 AVE APT 13E		5.2 NAME 5.3 STREET ADDRESS	3777 NW 78th Ave.,	Apt. 3-G		
STREET ADDRESS	HOLLYWOOD FL 33024			Hollywood, FL 330			
CITY-ST-ZIP TITLE	HOLLITTOOD FL 33024	☐ DELETE	6.1 TITLE		Change Addill		
NAME		Second of the least of the	6,2 NAME		TOTAL TOTAL STREET		
STREET ADORESS			6.3 STREET ADDRESS				
			6.4 CITY-ST-ZIP				
CITY-ST-ZIP	by postify that the information area	lind with this filing doop got avails		totad in Section 119 07/2Vi). Florida Statut	on I further contifu that the		

Ido 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 517, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: BUNESO Alle Ser REC

t 02-01-9

954-720-7677 Dayline Phone # 0023781