

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 28 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONSDOCUMENT # 727597 (7)  
1. Corporation Name  
FORSYTHE COLONY MAINTENANCE ASSOCIATION, INC.

Principal Place of Business

Mailing Address

% L. MILLER  
7100 N. W. 76TH ST.  
TAMARAC FL 33321-5145% L. MILLER  
7100 N. W. 76TH ST.  
TAMARAC FL 33321-51453. Date Incorporated or Qualified  
10/01/19733a. Date of Last Report  
02/02/19964. FEI Number  
59-1490563Applied For  
Not Applicable5. Certificate of Status Desired ☐\$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution ☐\$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City &amp; State

27 City &amp; State

23 Zip Country

28 Zip Country

24

29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MILLER, LEO  
7100 N. W. 76TH ST.  
TAMARAC FL 33321

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 TO ☐ DELETE  
NAME MILLER, LEO  
STREET ADDRESS 7418 NW 71ST AVE  
CITY - ST - ZIP TAMARAC, FL 000001.1 TITLE Vice President ☒ Change ☒ Addition  
1.2 NAME Babos, Frank  
1.3 STREET ADDRESS 7510 N.W. 71st Avenue  
1.4 CITY - ST - ZIP Tamarac, FLTITLE PD ☐ DELETE  
NAME WALLACH, SOL  
STREET ADDRESS 7422 NW 66TH TERR  
CITY - ST - ZIP TAMARAC FL2.1 TITLE Director ☐ Change ☒ Addition  
2.2 NAME Dominic Canazaro  
2.3 STREET ADDRESS 7203 N.W. 75th Court  
2.4 CITY - ST - ZIP Tamarac, FLTITLE DV ☒ DELETE  
NAME ~~BABOS, FRANK~~  
STREET ADDRESS ~~7510 N.W. 71ST AVE~~  
CITY - ST - ZIP ~~TAMARAC, FL 00000~~3.1 TITLE Director ☐ Change ☒ Addition  
3.2 NAME John Girone  
3.3 STREET ADDRESS 6605 N.W. 74th Place  
3.4 CITY - ST - ZIP Tamarac, FLTITLE VD ☐ DELETE  
NAME WEISZ, BELA  
STREET ADDRESS 6802 N.W. 75TH COURT  
CITY - ST - ZIP TAMARAC, FL 000004.1 TITLE Director ☐ Change ☒ Addition  
4.2 NAME Bernard Rachlin  
4.3 STREET ADDRESS 7419 N.W. 70th Avenue  
4.4 CITY - ST - ZIP Tamarac, FLTITLE VD ☒ DELETE  
NAME ~~SUTTAN, IRVING~~  
STREET ADDRESS ~~6803 N.W. 75TH COURT~~  
CITY - ST - ZIP ~~TAMARAC, FL 00000~~5.1 TITLE Director ☐ Change ☒ Addition  
5.2 NAME Bernard Korschun  
5.3 STREET ADDRESS 6606 N.W. 75th Street  
5.4 CITY - ST - ZIP Tamarac, FLTITLE SD ☐ DELETE  
NAME ROSENBLATT, SHIRLEY  
STREET ADDRESS 7419 N.W. 72ND TERRACE  
CITY - ST - ZIP TAMARAC, FL 000006.1 TITLE ☐ Change ☐ Addition  
6.2 NAME  
6.3 STREET ADDRESS  
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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0036950

CP2E037 (9/96)