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Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1997

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 727608 (2)

1. Corporation Name

MAJESTIC VIEW CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
6289 W. SUNRISE BLVD., SUITE 202 SUNRISE FL 33313-6192	6289 W. SUNRISE BLVD., SUITE 202 SUNRISE FL 33313-6154

3. Date Incorporated or Qualified: 10/02/1973
3a. Date of Last Report: 04/22/1996

2. Principal Place of Business
21: c/o Summit Property Mgmt.
22 Suite, Apt. #, etc.: PO Box 13913
23 City & State: Plantation FLA
24 Zip: 33318 25 Country:

2a. Mailing Address
26: c/o Summit Property Mgmt.
27 Suite, Apt. #, etc.: PO Box 13913
28 City & State: Plantation FLA
29 Zip: 33318 30 Country: USA

4. FEI Number: 59-1544837 ☐ Applied For ☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

SUMMIT PROPERTY MANAGEMENT, INC.
~~6289 WEST SUNRISE BLVD.~~
~~SUITE 202~~
~~SUNRISE FL 33313~~

10. Name and Address of New Registered Agent

81 Name:
82 Street Address (P.O. Box Number Is Not Acceptable): 4450 W SUNRISE BLVD
83: C-100
84 City: PLANTATION FL 85 Zip Code: 33313

11. Pursuant to the provisions of Section 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: Gail H. Sangunett Gail H. Sangunett, V.P. - Administration 2/7/97
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	D HARDIGAN, WILLIAM 8801-7 GATECHOUS RD PLANTATION FL	☐ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D AMIR, OFER 720-2 COCOPLUM CIRCLE PLANTATION FL	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	D JACK MILARSKY 8801-3 GATEHOUSE Rd PLANTATION, FL 33324	☑ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD VARGO, DEANN 760-5 COCOPLUM CIR PLANTATION FL	☒ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	S.D.	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD HOUGH, BOB 710-2 COCOPLUM CIR PLANTATION FL	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD ST. JEAN, ROBERT 751-7 COCOPLUM CIR PLANTATION FL	☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD VELINSKY, SIDNEY 8800-4 GATEHOUSE RD PLANTATION FL	☑ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (9/96)

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: William Hardigan 2/19/97
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date

(954) 792-6000
Daytime Phone # 0034817