

FILE NOW: FILING FEE IS \$61.25

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Mar 09 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 728610 (7)

1. Corporation Name

APPLE CREEK UNIT TWO, INC.



Principal Place of Business APPLE CREEK REC. CNT. 7301 W. SUNRISE BLVD PLANTATION FL 33313 US	Mailing Address APPLE CREEK REC CENTER 7301 W. SUNRISE BLVD. PLANTATION FL 33313 US
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3. Date Incorporated or Qualified 01/09/1974	4. FEI Number 59-1698257	Applied For Not Applicable
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2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip 28 Country
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5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required	6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No	
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent MORRIS, MARCIA 7165 W. SUNRISE BLVD PLANTATION FL 33313	10. Name and Address of New Registered Agent 81 Name ROBERT HOBART 82 Street Address (P.O. Box Number is Not Acceptable) 7301 W. SUNRISE BLVD 83 PLANTATION, FL 84 City FL 85 Zip Code 33313
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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 *Robert Hobart* (NOTE: Registered Agent signature required when reinstating) DATE March 2, 1998

12. OFFICERS AND DIRECTORS	
TITLE	TD MORRIS, MARCIA S <input checked="" type="checkbox"/> DELETE
NAME	7165 W. SUNRISE BLVD.
STREET ADDRESS	PLANTATION FL
CITY-ST-ZIP	
TITLE	PD FLETCHER, LORNA <input type="checkbox"/> DELETE
NAME	7163 W. SUNRISE BLVD.
STREET ADDRESS	PLANTATION FL
CITY-ST-ZIP	
TITLE	VD MCGUIRE, PAUL <input type="checkbox"/> DELETE
NAME	7213 W. SUNRISE BLVD
STREET ADDRESS	PLANTATION FL
CITY-ST-ZIP	
TITLE	FD FEDERMAN, ANNE <input type="checkbox"/> DELETE
NAME	7215 W. SUNRISE BLVD.
STREET ADDRESS	PLANTATION FL
CITY-ST-ZIP	
TITLE	SD MURPHY, PATRICK <input checked="" type="checkbox"/> DELETE
NAME	7147 W. SUNRISE BLVD.
STREET ADDRESS	PLANTATION FL
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	
4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 CITY-ST-ZIP	

14. I 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: *Anne Federman* March 2, 1998

CR2E037 (10/97)