

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # **728948** (1)

1. Corporation Name

MISSIONWOOD AT MIRAMAR CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

Mailing Address

8381 S. MISSIONWOOD CIRCLE
MIRAMAR FL 33025
US

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MIRAMAR FL 33025
US

3. Date Incorporated or Qualified
02/26/1974

3a. Date of Last Report
06/20/1995

2. Principal Place of Business

2a. Mailing Address

21

26

4. FEI Number

59-1506683

Applied For

Not Applicable

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional Fee Required

23 City & State

28 City & State

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

24 Zip

25 Country

29 Zip

30 Country

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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

~~TINA WHITING GAN, ON-SITE MANAGER~~
~~BECKER & POLIAKOFF PA~~
~~3111 STIRING ROAD~~
~~FORT LAUDERDALE FL 33312-6525~~

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 Director DELETE
NAME **HOLLINGSWORTH, DOROTHY**
STREET ADDRESS **8408 N MISSIONWOOD CIR**
CITY-ST-ZIP **MIRAMAR FL 33025**
Change

1.1 TITLE Director Change Addition
1.2 NAME **Alan Whites**
1.3 STREET ADDRESS **8412 N. Missionwood Circle**
1.4 CITY-ST-ZIP **MIRAMAR, FL 33025**

TITLE President DELETE
NAME **GANNIM, SHARIF**
STREET ADDRESS **2944 MISSIONWOOD LANE W**
CITY-ST-ZIP **MIRAMAR FL**
Change

2.1 TITLE Change Addition
2.2 NAME **William J. Pabon**
2.3 STREET ADDRESS **8386 N. Missionwood Circle**
2.4 CITY-ST-ZIP **MIRAMAR, FL 33025**

TITLE ~~VP~~ DELETE
NAME **JACKSON JASMINE**
STREET ADDRESS **8416 MISSIONWOOD CIRCLE**
CITY-ST-ZIP **MIRAMAR FL 33025**
Delete

3.1 TITLE Change Addition
3.2 NAME **Faith M. Gray**
3.3 STREET ADDRESS **3033 E MC**
3.4 CITY-ST-ZIP **MIRAMAR, FL 33025**
Traveller

TITLE Vice President DELETE
NAME **DUNDAS, MICHAEL**
STREET ADDRESS **8322 E MISSIONWOOD DR.**
CITY-ST-ZIP **MIRAMAR FL**
change

4.1 TITLE Change Addition
4.2 NAME **Michelle Rignones**
4.3 STREET ADDRESS **2940 E Missionwood Lane**
4.4 CITY-ST-ZIP **MIRAMAR, FL 33025**
Secretary

TITLE D DELETE
NAME **KELLY, PAT**
STREET ADDRESS **8364 N. MISSIONWOOD CIRCLE**
CITY-ST-ZIP **MIRAMAR FL 33025**

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE D DELETE
NAME **CORTEZ, MARIE M**
STREET ADDRESS **3042 E. MISSIONWOOD CIRCLE**
CITY-ST-ZIP **MIRAMAR FL 33025**
Delete

6.1 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 is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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]* - Pres. 1/26/96 305-4317957
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (12/95)