FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 APR -6 AM 6:38
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 729838 (3)

1. Corporation Name
THE OAKS CONDOMINIUM ASSOCIATION, INC. OF BROWARD

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
4151 STIRLING ROAD FORT LAUDERDALE FL 33314	4151 STIRLING ROAD FORT LAUDERDALE FL 33314

3. Date Incorporated or Qualified: 05/20/1974
3a. Date of Last Report: 04/08/1994
4. FEI Number: 59-1658714 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

5. Certificate of Status Desired ☐ — $8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ — $5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ — $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

HEARN, MICHELLE
4121 STIRLING RD
#208
FT LAUDERDALE FL 33314

10. Name and Address of New Registered Agent

91 Name: WARLINSKY, JOSEPH
92 Street Address (P.O. Box Number is Not Acceptable): 4131 STIRLING RD.
93: #302
94 City: FT. LAUDERDALE, FL 95 Zip Code: 33314

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: Joseph Warlinsky Secr. — Joseph Warlinski — 3-21-95
Signature, typed or printed name of registered agent, and title if applicable (Must be Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	1.1 TITLE	PRESIDENT (D) ☒ Change ☐ Addition
NAME	GUHNE, CONSTANCE	1.2 NAME	MICHAEL, VALERIE
STREET ADDRESS	4121 STIRLING RD., #403	1.3 STREET ADDRESS	4111 STIRLING RD #403
CITY-ST-ZIP	FT LAUDERDALE FL	1.4 CITY-ST-ZIP	FT. LAUDERDALE, FL. 33314
TITLE	VP	2.1 TITLE	RUSH, SYD - VICE PRES. (D) ☒ Change ☐ Addition
NAME	WARLINSKI, JOSPEH	2.2 NAME	
STREET ADDRESS	4131 STIRLING RD.	2.3 STREET ADDRESS	4131 STIRLING RD. #204
CITY-ST-ZIP	FT LAUDERDALE FL	2.4 CITY-ST-ZIP	FT. LAUDERDALE, FL. 33314
TITLE	S	3.1 TITLE	SECRETARY (D) ☒ Change ☐ Addition
NAME	HEARN, MICHELE	3.2 NAME	WARLINSKY, JOSEPH
STREET ADDRESS	4121 STIRLING RD., #208	3.3 STREET ADDRESS	4131 STIRLING RD.
CITY-ST-ZIP	FT LAUDERDALE FL	3.4 CITY-ST-ZIP	FT. LAUDERDALE, FL. 33314
TITLE	T	4.1 TITLE	☐ Change ☐ Addition
NAME	FISHER, CAROL	4.2 NAME	
STREET ADDRESS	4131 STIRLING RD., #102	4.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL	4.4 CITY-ST-ZIP	
TITLE	D	5.1 TITLE	☐ Change ☐ Addition
NAME	FELICELLA, DON	5.2 NAME	
STREET ADDRESS	2111 N. 54 AVE.	5.3 STREET ADDRESS	
CITY-ST-ZIP	HOLLYWOOD FL	5.4 CITY-ST-ZIP	
TITLE		6.1 TITLE	☐ Change ☐ Addition
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		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)(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: Syd Rush V.P. — 3-18-95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
Syd Rush V.P.

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