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FILED
May 08 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **729838** (3)
1. Corporation Name
THE OAKS CONDOMINIUM ASSOCIATION, INC. OF BROWAR
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Principal Place of Business 4151 STIRLING ROAD FORT LAUDERDALE FL 33314	Mailing Address 4151 STIRLING ROAD FORT LAUDERDALE FL 33314
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2. Principal Place of Business 21 SAME Suite, Apt. #, etc.	2a. Mailing Address 26 SAME Suite, Apt. #, etc.
23 City & State 24 Zip Country	27 City & State 28 Zip Country

3. Date Incorporated or Qualified 05/20/1974	
4. FEI Number 59-1658714	☐ 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
7. Is this nonprofit corporation a homeowners association? CONDOMINIUM ☒ Yes ☐ No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent MICHAEL, VALERIE 4121 STIRLING ROAD #305 FT LAUDERDALE FL 33314	10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 Zip Code
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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 _____ (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when re/instating) DATE _____

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE NAME STREET ADDRESS CITY-ST-ZIP PD GUHNE, GENE 4121 STIRLING RD, #403 FT LAUDERDALE FL	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP PD BUKOV, GENE 1710 NW 62ND AVE HOLLYWOOD FL	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TD DROMER, JAMES 4121 STIRLING ROAD, #101 FT LAUDERDALE FL	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP TD MICHAEL, VALERIE 4121 STIRLING RD., #305 FT LAUDERDALE FL	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP ☐ Change ☒ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP D RUSH, SYD 4131 STIRLING RD, #204 FT LAUDERDALE FL	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY-ST-ZIP D ARTICOLA, GEORGE 4121 STIRLING RD #209 FT LAUDERDALE FL	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP ☐ Change ☐ Addition

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: **VALERIE MICHAEL** *Valerie L. Michael* 4-27-98 954-581-2130

CR25037 (10/97)