FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMEN'

738883

(8)

VILLAS AT WOODMONT CONDOMINIUM - 73, INC.

		JUMONT CONU				,							
Principal Place of Business			Me	ailing Address					(1991tt 1994s Miss 1818)		, 41611 ALBU	* #1811 87811	2161) W1811 (89)
7401 PALM TERRACE P.O. BOX 25333 TAMARAC FL 33320			P.O TAN	7401 PALM TERRACE P.O. BOX 25333 TAMARAC FL 33320					. Date Incorporated or C 05/02/1977	lualified			
US			US					•	59-1861871				Applied For Not Applicable
Principal Place of Business The Principal Place of Business			<u>├</u>	2a. Mailing Address				5.	Certificate of Status De	sired		\$8.75	Additional Required
Suite, Apt. #, etc.			100	Suite, Apt. #, etc.				6.	B. Election Campaign Financing Trust Fund Contribution Added to Fees				
City & State				City & State				7.	Is this nonprofit corpora				
23			26						· · · · · · · · · · · · · · · · · · ·	<u></u>	Yes 🗆] No	
Zip		Country		Zip		country	7	8.	This corporation owes				
24		25 and Address of Cu	rrent Regist	tered Agent	30		··	10.	Personal Property Tax of Name and Address of				XI No
<u> </u>						81	Name						
EISNER.	JULIAN					82	Street A	ddress (F	P.O. Box Number is Not	Accentable	1		
7401 PALM TERRACE							0				<u> </u>		
TAMARA	NC FL 3332	1				83							ľ
						84	City				FL	85 Zip	Code
11. Pursuant office or r agent. I a	to the provisi registered ag im familiar wi	ions of Sections 617. ent, or both, in the S th, and accept the o	0502 and 6 tate of Floric bligations of	17.1508, Fiorida Sta da. Such change wa l, Section 617.0503,	itutes, the as authoriz Florida St	above zed by	s-named of the corpo	corporatio oration's l	on submits this statement board of directors. I here	for the pur by accept		changing Intment a	its registered s registered
SIGNATURE .													
	Slonatura Ivoad												
12.		or printed name of registere			NOTE: Registe		nt signature r			TO OFFICE	DATE RS AND	DIBECTO	RS IN 12
12.			AND DIREC		13		int signature r		n reinstating) ADDITIONS/CHANGES 1	TO OFFICE	RS AND	DIRECTO Change	
	VPD EISNER,	OFFICERS		CTORS	1.1	3.	nt signature r			TO OFFICE	RS AND		
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TITLE NAME STREET ADDRESS CITY-ST-ZIP	VPD EISNER, 7401 PA TAMARA	OFFICERS JULIAN LIM TERRACE		CTORS DELETE	13 1.1 1.2 1.3 1.4	3. 1 TITLE 2 NAME 3 STREET 4 CITY-S	ADDRESS			TO OFFICE	RS AND	Change	Addition
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Thereby 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 eath; 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 chapted, or on an attachment with an address.

SIGNATURE:

lene obuney OFRITHE GDOWNE

April 28 98 (954) 351-6105

FILED

May 08 1998 8:00am

Secretary of State