


FILE NOW: FILING FEE IS \$61.25

FILED  
Apr 13 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 740322 (3)**  
1. Corporation Name  
**COMMUNITY ASSOCIATIONS INSTITUTE (GREATER MIAMI CHAPTER), INC.**



Principal Place of Business 12350 S.W. 132 COURT #207 MIAMI FL 33186	Mailing Address 12350 S.W. 132 COURT #207 MIAMI FL 33186
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3. Date Incorporated or Qualified <b>10/05/1977</b>		
4. FEI Number <b>59-1804339</b>	Applied For <input type="checkbox"/>	Not Applicable <input type="checkbox"/>

2. Principal Place of Business 21 12973 S.W. 112 Street Suite, Apt. #, etc. 22 Suite #223 City & State 23 Miami, Florida Zip 24 33186	2a. Mailing Address 25 5201 Blue Lagoon Drive Suite, Apt. #, etc. 26 Suite 100 City & State 27 Miami, Florida Zip 28 33126-2065	Country 29 USA	Country 30 USA
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5. Certificate of Status Desired <input type="checkbox"/>	<b>\$8.75 Additional Fee Required</b>
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	<b>\$5.00 May Be Added to Fees</b>
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

9. Name and Address of Current Registered Agent  
**SALVAT, LOU**  
12350 S.W. 132 COURT  
#207  
MIAMI FL 33186

10. Name and Address of New Registered Agent  
81 Name **Rosa De La Camara**  
82 Street Address (P.O. Box Number is Not Acceptable)  
**Becker & Poliakoff**  
83 **5201 Blue Lagoon Drive, Suite 100**  
84 City **Miami** FL 85 Zip Code **33126-2065**

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: *Rosa De La Camara* DATE: **3/02/98**

(NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<input type="checkbox"/> DELETE	1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>KANE, MONTE</b>	1.2 NAME	<b>Gonzalez, Mario J.</b>
STREET ADDRESS	<b>1101 BRICKELL AVE #M-101</b>	1.3 STREET ADDRESS	<b>14750 Palmetto Frontage Rd, Ste. 120</b>
CITY-ST-ZIP	<b>MIAMI FL 33131</b>	1.4 CITY-ST-ZIP	<b>Miami Lakes, FL 33016</b>
TITLE	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>AMOS, LINDA</b>	2.2 NAME	<b>Jason, Jerry</b>
STREET ADDRESS	<b>2745 W. CYPRESS CREEK RD.</b>	2.3 STREET ADDRESS	<b>11578 SW 132 Avenue</b>
CITY-ST-ZIP	<b>FT. LAUDERDALE FL 33309</b>	2.4 CITY-ST-ZIP	<b>Miami, FL 33186</b>
TITLE	<input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>SALVAT, KAREN</b>	3.2 NAME	<b>Spivak, Merrill</b>
STREET ADDRESS	<b>12350 S.W. 132 COURT, #209</b>	3.3 STREET ADDRESS	<b>1840 N.E. 153 Street</b>
CITY-ST-ZIP	<b>MIAMI FL 33186-6458</b>	3.4 CITY-ST-ZIP	<b>North Miami Beach, FL 33162</b>
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>REHR, MICHAEL</b>	4.2 NAME	<b>Goyanez, Anastasio</b>
STREET ADDRESS	<b>220 MIRACLE MILE, SUITE 238</b>	4.3 STREET ADDRESS	<b>1481 N.E. Miami Gardens Dr. #171</b>
CITY-ST-ZIP	<b>CORAL GABLES FL 33134-6734</b>	4.4 CITY-ST-ZIP	<b>North Miami Beach, FL 33179-4827</b>
TITLE	<input checked="" type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>BLINDER, HAROLD</b>	5.2 NAME	<b>Hyman, Michael</b>
STREET ADDRESS	<b>7800 MIAMI LAKES DRIVE WEST</b>	5.3 STREET ADDRESS	<b>150 West Flagler Street, Ste 2701</b>
CITY-ST-ZIP	<b>MIAMI LAKES FL 33016</b>	5.4 CITY-ST-ZIP	<b>Miami, FL 33130</b>
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>DELACAMARA, ROSA</b>	6.2 NAME	<b>Gerstle, Mark</b>
STREET ADDRESS	<b>5201 BLUE LAGOON DRIVE, SUITE 100</b>	6.3 STREET ADDRESS	<b>19495 Biscayne Blvd., #705</b>
CITY-ST-ZIP	<b>MIAMI FL 33126-2065</b>	6.4 CITY-ST-ZIP	<b>Aventura, FL 33180-2320</b>

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: *Linda Amos* **LINDA AMOS** **4/6/98**

CPREC07 (10/97)

CAI-GREATER MIAMI CHAPTER

DOCUMENT # 740322

1998 NONPROFIT CORPORATION ANNUAL REPORT

LINE 13. Add the following Directors:

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Merling Jr., James  
7741 S.W. 55 Avenue # C  
Miami, FL 33143

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Santibanez, Lee  
888 Brickell Key Drive  
Miami, FL 33131