FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

1998

DOCUMENT #

740506

(1)

THE COMMUNITY CLUB OF MIAMI, INC.							
Principal Place of Business		Mailing Address	Mailing Address			T 1891KU YABUN BATAN BATAN BATAN BANKA BIRIN BATAN	
1885 NW 70TH ST. MIAAM FL 33147		1885 NW 70TH ST. Miami FL 33147				3. Date incorporated or Qualified 08/24/1977 4. FEI Number L Applied For	
2. Principal P	lace of Business	Za. Mailing Address	2a. Mailing Address			59-1763295 /S Not Applicable	
21		— ·	26			5. Certificate of Status Desired Section Secti	
Suite, Apt.	#, etc.	Suite, Apt. #, etc.	Suite, Apt. #, etc.			6. Election Campaign Financing \$5.00 May Be	
22		27				Trust Fund Contribution Added to Fees	
City & Stat	е	City & State	├ ┐ ′			7. Is this nonprofit corporation a homeowners association?	
23		28				☐ Yes ☐ No	
Zip	} ′	h, '		ntry		8. This corporation owes or has paid the current year Intangible	
24	9. Name and Address of Curre	29 Annt Registered Agent	30	<u>0</u>		Personal Property Tax due June 30. Yes No 10. Name and Address of New Registered Agent	
The state of the s				81	Name	14. Hanne and Medices of Heat Hadistrian Maint	
FERGUSON, GILFREAD			ļ.,	-	Charact Andrea	(0.0.0	
1885 NW 70 STREET			l'	82 Street Address (P.O. Box Number is Not Acceptable)			
MIAMI FL FL 33147			Ī	83			
			84 City		City	- 85 Zip Code	
			- 1				
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 register 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.							
agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.							
SIGNATURE Signature, typed or profiled name of registered agent and title if applicable. (NOTE Registered Agent signature required when reinstating) DATE							
12.	OFFICERS AND DIRECTORS		113.			ed when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PT	DELETE 1.1		E	<u> </u>	☐ Change ☐ Addition	
NAME	FERGUSON, GILFREAD		1.2 NAM	ME			
STREET ADDRESS	950 NW 95TH STREET, #210	0	1.3 STR	1.3 STREET ADDRESS			
CITY-ST-ZIP	MIAMI FL			1.4 CITY-ST-ZIP			
TITLE	VPT	DELETE	2.1 TITL	.E		☐ Change ☐ Addition	
NAME	EVANS, LOLITA V 2.		2.2 NAA	ΛE			
STREET ADDRESS	826 NW 76TH STREET		2.3 STREET ADDRESS		DORESS		
CITY-ST-ZIP			2. 4 CIT		- ZIP		
TITLE	▼ !		3.1 T(TL			Change Addition	
NAME	JOHNSON, WILLIEMAE		3.2 NAME				
STREET ADDRESS	860 NW 74TH STREET		3.3 STREET ADOR				
CITY-ST-ZIP TITLE			3.4. CIT 4.1 TITL	_	- ZIP	Change Addition	
NAME	RAHMING, KELVESE E	been				Change Change Admitted	
STREET ADDRESS	1885 NW 70TH STREET		4.2 NAME		PDDECC		
CITY-SI-ZIP MIAMI FL			4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		·		
TITLE	MIN WILL L	☐ DELETE	5.1 TITLE		ZIP	☐ Change ☐ Addition	
NAME	_			5.2 NAME		C Onango C Addition	
STREET ADDRESS			5.3 STR		DDAFSS		
			5.4 CITY	_		•	
TITLE			6.1 TITL		<u></u>	☐ Change ☐ Addition	
NAME	AAME		6.2 NAM	Æ		_ · -	

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.

6.3 STREET ADDRESS

SIGNATURE

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04-19-98

305/693-292/

FILED

May 01 1998 8:00am

Secretary of State

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