

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

FILED
May 08, 1999 8:00 am
Secretary of State

05-08-1999 90033 031 ****61.25

DOCUMENT # 741198

1. Corporation Name

ELDORADO COUNTRY CLUB TOWERS NORTH ASSOCIATION,
NC.

Principal Place of Business

161 N.E. 10TH AVE.
HALLANDALE FL 33009

Mailing Address

161 N.E. 10TH AVE.
HALLANDALE FL 33009



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

12/30/1977

4. FEI Number

59-1148347

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

9. Name and Address of Current Registered Agent

BECKER & POLIAKOFF, P.A.
3111 STIRLING RD
P O BOX 9057
FT LAUDERDALE 33312-3525

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

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 reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE D ☐ DELETE

NAME MARINO, FRANK
STREET ADDRESS 161 N.E. 10TH AVE. APT 8-B
CITY-ST-ZIP HALLANDALE FL 33009

TITLE VPS ☐ DELETE

NAME NADEAU, ROLAND
STREET ADDRESS 161 N.E. 10TH AVE. APT 9-C
CITY-ST-ZIP HALLANDALE FL 33009

TITLE D ☐ DELETE

NAME SPANO, PASQUALE
STREET ADDRESS 161 N.E. 10TH AVE. APT 2-C
CITY-ST-ZIP HALLANDALE FL 33009

TITLE DVP ☐ DELETE

NAME MYERES, BETTY
STREET ADDRESS 151 NE 10TH AVE APT. 313
CITY-ST-ZIP HALLANDALE FL

TITLE P ☐ DELETE

NAME ONDREY, WALTER
STREET ADDRESS 161 NE 10TH AVENUE APT 1A
CITY-ST-ZIP HALLANDALE FL

TITLE D ☐ DELETE

NAME FOURNIER, JEAN GUY
STREET ADDRESS 161 NE 10TH AVE APT 5-C
CITY-ST-ZIP HALLANDALE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

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, with all other like empowered.

SIGNATURE: *[Signature]*

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

April 22, 1999

Date

Daytime Phone #

CR2E037 (1/98)