

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
Mar 11, 1999 8:00 am
Secretary of State

03-11-1999 90146 026 ****61.25

DOCUMENT # 741447

1. Corporation Name

COLONY WOODS HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business

22097 COLONY DRIVE
BOCA RATON FL 33433

Mailing Address

22097 COLONY DRIVE
BOCA RATON FL 33433



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

3. Date Incorporated or Qualified

01/25/1978

4. FEI Number

59-1898633

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

WHITE, CLAIR F.
25 S. ANDREWS AVENUE
SUITE 600
FORT LAUDERDALE FL 33302

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 PD ☐ DELETE

NAME SINGER, HAROLD
STREET ADDRESS 5881 COLONY CT
CITY-ST-ZIP BOCA RATON FL 33433

TITLE DVP ☐ DELETE

NAME NUNNKILLY, SUSAN
STREET ADDRESS 5975 COLONY ST
CITY-ST-ZIP BOCA RATON FL 33433

TITLE DT ☐ DELETE

NAME GLASCOM, HENRY
STREET ADDRESS 22002 COLONY DRIVE
CITY-ST-ZIP BOCA RATON, FL 00000

TITLE D ☐ DELETE

NAME KOSTAMO, MARTHA
STREET ADDRESS 5908 COLONY ST
CITY-ST-ZIP BOCA RATON FL 33433

TITLE D ☒ DELETE

NAME FORSTAND, IRVING
STREET ADDRESS 5838 COLONY COURT
CITY-ST-ZIP BOCA RATON FL

TITLE DS ☒ DELETE

NAME HENRY, MARY W
STREET ADDRESS 5968 COLONY COURT
CITY-ST-ZIP BOCA RATON FL 33433

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☒ Change ☒ Addition

1.2 NAME SECRETARY
1.3 STREET ADDRESS CLAIR F. JANTET
1.4 CITY-ST-ZIP 2204 COLONY DRIVE
BOCA RATON, FL 33433

2.1 TITLE ☒ Change ☒ Addition

2.2 NAME D
2.3 STREET ADDRESS ALBERT FUSARI
2.4 CITY-ST-ZIP 5860 COLONY CT.
BOCA RATON, FL 33433

3.1 TITLE ☐ Change ☒ Addition

3.2 NAME D
3.3 STREET ADDRESS RONARD WOOSTER
3.4 CITY-ST-ZIP 5838 COLONY CT.
BOCA RATON, FL 33433

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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

3/18/99

561-338-3224

Date

Daytime Phone #

CR2E037 (11/98)