743315

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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Special Instructions to Filing Officer:

Office Use Only

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743315

# C. & C. CONDOMINIUM ASSOCIATION, INC.

FILED ARTICLES OF INCORPORATIONS ON JUNE 19, 1978

PAGES 1 THROUGH 3 IS MISSING FROM MICROFILM.

MARGARET V. FREEMAN

CERTIFICATION SECTION

MARCH 21, 2019

## CORPORATION NOT FOR PROFIT

Word Processing: June 22, 1978 By: sl

Updating: 7-10-78 By: AW

A notification letter was mailed to: Mr. Gerald J. Biondo, Esq.
200 SE 1st Street, Penthouse
Miami, FL 33131
Processor File # 162

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Corporation Name: C. & C. CONDOMINIUM ASSOCIATION, INC.

Filing Date: June 19, 1978

Charter Number: 743315

Money acknowledged on notification letter: $38.00

743315

LAW OFFICES OF
**PAUL, LANDY, BEILEY & YACOS**
PENTHOUSE, GREATER MIAMI FEDERAL BUILDING
200 SOUTHEAST FIRST STREET
MIAMI, FLORIDA 33131
TEL.(305) 358-9300 · CABLE "PAULAN"
TELEX 51-9486

ROBERT PAUL
BURTON A. LANDY
PETER H. MORRISON*
STANLEY A. BEILEY
JAMES E. YACOS
GEORGE R. HARPER
RENE V. MURAI
HUBER R. PARSONS, JR.
EDWARD FARHAN*
BENJAMIN ZELERMYER*
GERALD G. PAUL*
GERALD B. WALD
GERALD J. BIONDO
NOLAN P. CHIPMAN
PATRICIA IRELAND
JEFFREY E. TANEN
MARY JOAN DAVIS
ROBERT McGINNIS
JOSEPH M. MATTHEWS

*ADMITTED IN NEW YORK ONLY

NEW YORK OFFICE
MORRISON, PAUL & BEILEY
110 EAST 59TH STREET
NEW YORK, N.Y. 10022
TEL.(212) 593-0100
CABLE "MORRPAUL"
TELEX 12-6873

LONDON OFFICE
LANDY, PAUL & MORRISON
28 ST. JAMES'S STREET
LONDON SW1A 1HB
TEL.(01) 839-1879
TELEX 86-4287 PAULAN G

June 13, 1978

Secretary of State
Division of Corporations
6501 N.W. 36th Street, Suite 415
Miami, Florida 33166

22-78 2 07600*****3.00
22-78 2 07500*****5.00
22-78 2 07400*****30.00

Re: C. & C. Condominium Association, Inc.

Dear Sir:

Enclosed herewith please find Articles of Incorporation for C. & C. Condominium Association, Inc., together with our check in the amount of $38.00 covering filing fee, certified [illegible] and Resident Agent fee.

Thank you for your attention hereto.

Very truly yours,

Gerald J Biondo

Gerald J. Biondo

GJB/rfm
encls.

| | |
|---|---|
| C. TAX | |
| FILING | 30 |
| R. AGENT FEE | 3 |
| C. COPY | 5 |
| TOTAL | 38 |
| N. BANK | |
| BALANCE DUE | |
| REFUND | |

R 2 3
R23318

APPROVED AND FILED
JUN 19 4 16 PM 1978
FLORIDA DEPT. OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

subject to the following:

(a) Notwithstanding the foregoing, when unit owners other than the Developer own fifteen percent (15%) of the units that will be operated by the Association, the unit owners, other than the Developer shall be entitled to elect one-third (1/3) of the members of the Board of Directors of the Association. Unit owners other than the Developer shall be entitled to elect fifty-one percent (51%) of the members of the Board of Directors three (3) years after sales by the Developer have been closed of fifty percent (50%) of the units to be operated by the Association or three months after sales have been closed by the Developer of ninety percent (90%) of the units to be operated by the Association, or when all of the Units that will be operated ultimately by the Association have been completed and some of them have been sold and none of the others are being offered for sale by the Developer in the ordinary course of business whichever shall first occur. The Developer shall be entitled to elect not less than one (1) member of the Board of Directors so long as the Developer owns any unit in the Condominium.

Within sixty (60) days after Unit Owners other than the Developer are entitled to elect a member or members of the Board of Directors of the Association, the Association shall call and give not less than thirty (30) days nor more than forty (40) days notice of a meeting of the Unit Owners for this purpose. Such meeting may be called and the notice given by any Unit Owner if the Association fails to do so.

(b) While Developer owns any units in the Condominium, none of the following actions may be taken without approval in writing by the Developer.

1. Assessment of the Developer as a unit owner for capital improvements.

2. Any action by the Association that would be detrimental to the sales of units by the Developer.

Vacancies in the Board of Directors shall then be filled for the unexpired term by the remaining Directors at any regular or special Directors' meeting. Directors elected by the Members of the Corporation as distinguished from those Directors elected by the Developer, shall be Members of the Corporation. Until each Unit is sold one time, the Developer shall have the complete and absolute right to determine to whom the Unit is to be sold and to make such sale, without procuring the approval of (a) this Corporation or its Officers or Directors; and (b) the Members of this Corporation or the Owner of the Condominium Units' and (c) any parties whomsoever.

(c) Prior to or within a reasonable time after Unit Owners, other than the Developer, elect a majority of the members of the Board of Directors, the Developer shall relinquish control of the Association and deliver to the Association those items specifically enumerated in Section 718.301(4) of the Florida Statutes.

## ARTICLE IX

The Board of Directors shall elect a President, Secretary and Treasurer, and as many Vice Presidents, Assistant Secretaries and Assistant Treasurers as the Board of Directors shall determine. The President shall be elected from among the membership of the Board of Directors, but no other officer need be a Director. The same person may hold two offices, the duties of which are not incompatible, provided, however, that the office of the President and Vice President shall not be held by the same person; neither shall the office of President and Secretary or Assistant Secretary be held by the same person.

## ARTICLE X

The names and post office addresses of the first Board of Directors who, subject to the provisions of these Articles of Incorporation, the By-Laws and the laws of the State of Florida, shall hold office for the first year of the Corporation's existence, or until their successors are elected and have qualified, are as follows:

| NAME | ADDRESS |
|---|---|
| R. A. KRAUSE | 150 S.E. Third Avenue<br>Miami, Florida 33131 |
| C.H. HATHAWAY | 150 S.E. Third Avenue<br>Miami, Florida 33131 |
| GERARD E. FABER | 150 S.E. Third Avenue<br>Miami, Florida 33131 |

## ARTICLE XI

The subscribers to these Articles of Incorporation are the persons herein named to act and serve as members of the first Board of Directors of the Corporation, the names of which subscribers and their respective post office addresses are more particularly set forth in Article X above.

## ARTICLE XII

The officers of the Corporation who shall serve until the first election under these Articles of Incorporation shall be the following:

| NAME | OFFICE |
|---|---|
| R. A. KRAUSE | President |
| C.H. HATHAWAY | Vice President |
| GERARD E. FABER | Secretary-Treasurer |

## ARTICLE XIII

The initial By-Laws of this Corporation are those annexed to the Declaration of Condominium to be made by SOUTH ATLANTIC TRUST, a Massachusetts Business Trust, the Developer of the Condominium, and to be recorded among the Public Records of Broward County, Florida. Such By-Laws subject to the provisions herein and therein contained, may be altered, amended or added to in the manner provided for in these Articles of Incorporation and in conformity with the provisions and requirements of Chapter 718, Florida Statutes.

## ARTICLE XIV

Every Director and every officer of the Corporation shall be indemnified by the Corporation against all expenses and liabilities, including counsel fees, reasonably incurred by, or imposed upon, him in connection with any proceeding to which he may be a party, or in which he may become involved by reason of his being or having been a Director or Officer of the Corporation, whether or not he is a Director or Officer at the time such expenses are incurred, except in such cases wherein the Director or officer is adjudged guilty of wilful misfeasance or malfeasance in the performance of his duties, provided that, in the event of any claim for reimbursement or indemnification hereunder based upon a settlement by the Director or Officer seeking such reimbursement or indemnification, the indemnification herein shall only apply if the Board of Directors approves such settlement and reimbursement as being in the best interests of the Corporation. The foregoing right of indemnification shall be in addition to, and not exclusive of, all other rights to which such Director or Officer may be entitled.

## ARTICLE XV

An Amendment or Amendments to these Articles of Incorporation may be proposed by the Board of Directors of the Corporation acting upon a vote of the majority of the Directors, or by the members of the Corporation owning a majority of the Condominium Units in the Condominium, whether meeting as members or by instrument, in writing, signed by them. Upon any amendment or amendments to these Articles of Incorporation being proposed by said Board of Directors or members, such proposed amendment or amendments shall be transmitted to the President of the Corporation or other Officer of the Corporation, in the absence of the President, who shall, thereupon, call a Special Meeting of the Members of the Corporation for a date not sooner than fifteen (15) days, or later than forty-five (45) days from the receipt by him of the proposed amendment or amendments, and it shall be the duty of the Secretary to give each member written or printed notice of such meeting, stating the time and place of the meeting and reciting the proposed amendment or amendments in reasonably detailed form, which notice shall be posted in a conspicuous place on the Condominium property and be mailed or presented personally to each member not less than fifteen (15) days, or more than thirty (30) days, before the date set for such meeting. If mailed, such notice shall be deemed to be properly given when deposited in the United States mail, addressed to the member at his post office address as it appears on the records of the Corporation, the postage thereon prepaid. Any member may, by written waiver of notice signed by such member, waive such notice, and such waiver, when filed in the records of the Corporation, whether before or after the holding of the meeting shall be deemed equivalent to the giving of such notice to such member. At such meeting, the amendment or amendments proposed may be approved by an affirmative vote of the members owning not less than seventy-five percent (75%) of the Corporation in order for such amendment or amendments to become effective. Thereupon, such amendment or amendments of these Articles of Incorporation shall be transcribed and certified in such form as may be necessary to register the same in the office of the Secretary of State, State of Florida, and upon the registration of such amendment or amendments with said Secretary of State a certified copy thereof shall be recorded in the Public Records of Broward County, Florida, within ten (10) days from the date on which the same are so registered. At any meeting held to consider such amendments of these Articles of Incorporation, the written vote of any member of the Corporation shall be recognized, if such member is not in attendance at such meeting or represented thereat by proxy, provided such written vote is delivered to the Secretary of the Corporation at or prior to such meeting.

Notwithstanding the foregoing provisions of this Article XV, no amendment to these Articles of Incorporation which shall abridge, amend or alter the rights of the Developer to designate and select members of each Board of Directors of the Corporation, as provided in Article VIII, hereof, may be adopted or become effective without the prior written consent of the said Developer.

No amendment to these Articles of Incorporation shall be adopted which would operate to prejudice or impair the right or privileges of any institutional first mortgagee as such rights and privileges have been established in the Declaration of Condominium of CYPRESS COVE CONDOMINIUM.

IN WITNESS WHEREOF, the subscribers have hereunto set their hands and seals this 9th day of June, 1978, at Miami, Florida.

R A Krause (SEAL)
R.A. KRAUSE

C.H. Hathaway (SEAL)
C.H. HATHAWAY

Gerard E. Faber (SEAL)
GERARD E. FABER

STATE OF FLORIDA )
COUNTY OF DADE )

BEFORE ME, the undersigned authority, personally appeared R.A. KRAUSE, C.H. HATHAWAY and GERARD E. FABER, whom being first duly sworn, acknowledge that they executed the foregoing Articles of Incorporation of C. & C. CONDOMINIUM ASSOCIATION, INC. for the purposes therein expressed this 9th day of June, 1978.

NOTARY PUBLIC, STATE OF FLORIDA
AT LARGE

My Commission Expires:

Notary Public State of Florida at Large.
My Commission Expires Feb. 24, 1981.

## CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING RESIDENT AGENT UPON WHOM PROCESS MAY BE SERVED.

In pursuance of Chapter 48.091, Florida Statutes, the following is submitted, in compliance with said Act:

That C. & C. CONDOMINIUM ASSOCIATION, INC.

desiring to organize under the laws of the state of Florida, with its principal place of business, as indicated in the Articles of Incorporation, at city of Miami, County of Dade, Florida, has named GERARD E. FABER, located at

150 S.E. Third Avenue, Miami, Florida 33131,

as its agent to accept service of process within this state.

## ACKNOWLEDGMENT

Having been named to accept service of process for the above-stated corporation, at place designated in this certificate, I hereby accept to act in this capacity and agree to comply with the provision of said Act in regard to keeping open said office.

By: Gerard E. Faber

Gerard E. Faber, Resident Agent

743315

PRINTOUT SENT

LETTER SENT

FILED CUS

88 MAY 16 AM 2:13

SECRETARY OF STATE
TALLAHASSEE FLORIDA

REINSTATEMENT FILED 5/16/88

INVOLUNTARILY DISSOLVED 12/8/79

CdC Condominium Association, Inc

**REINSTATEMENT** $100
**CUS** $5
**Registered Agent**
**Overpayment** $5
**72 Privilege Tax**
**73 Annual Report**
**74 Annual Report**
**75 Annual Report**
**76 Annual Report**
**77 Annual Report**
**78 Annual Report**
**79 Annual Report** $25
**80 Annual Report** $25
**81 Annual Report** $25
**82 Annual Report** $25
**83 Annual Report** $25
**84 Annual Report** $25
**85 Annual Report** $25
**86 Annual Report** $25
**87 Annual Report** $25
**88 Annual Report** $25
**TOTAL** $355

**REFUND**

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05/18/88 00:29 004
REINSTATEMENT
CERT/PHOTO COPY            5.
==========================
TOTAL                      5.
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05/18/88 00:29 005
REINSTATEMENT
REINSTATEMENT            100.
ANNUAL REPORT            250.
==========================
TOTAL                    350.
```

**NAME AVAILABLE**
**REINSTATED BY** 005/13/88
**UPDATER** 005/16/88
**UPDATER VERIFYER**

CR2E054 (12-87)

CORPORATION

ANNUAL REPORT

79 - 1988

DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

FILED
88 MAY 16 AM 2:13
SECRETARY OF STATE
TALLAHASSEE FLORIDA

Filing Fee of $25 Required - Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

C & C Condominium Assoc. Inc.
675 Cypress Lane
Wilton Manors, Fla. 33305

74/3315 00

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone NOT Sufficient

Street Address 21: 675 Cypress Lane
PO Box No 22: Pending 1986
City and State 23: Wilton Manors, Fla.
Zip Code 24: 33305 (#21) 33334(

3. Date Incorporated or Qualified To Do Business in Florida: Nov 1978

Federal Employer Identification Number (FEI): 59-1977930

5. Date of Last Report: [illegible]

6. Names and Street Addresses of Each Officer and Director

| 1. Names of Officers and Directors | 2. Title | 3. Street Address of Each Officer and Director (Do Not Use Post Office Box Numbers) | 4. City and State |
|---|---|---|---|
| George Gulliksen | P/D | 6 Country Way | Wilton Manors, Fla |
| Edwin R. Schaefer | V/D | 671 Kensington Place | " " |
| Dianne Annucci | S/D | 654 Kensington Place | " " |
| Carolyn J. Williams | T/D | 655 Cypress Lane | " " |
| Edward Dandreano | D | 667 Cypress Lane | " " |
| Roe Rivero | D | 673 Cypress Lane | " " |

ED 5/16/8

## REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

Same as #8 (we had never appointed a Registered Agent prior to 5/9/88 - to the best of our knowledge

8. Name and Address of New Registered Agent

Name 81: Miss Georgianna Miles
Street Address 1 (Do NOT Use P.O. Box Number) 82: 675 Cypress Lane
Street Address 2 (Do NOT Use P.O. Box Number) 83:
City and State 84: Wilton Manors FL
Zip Code 85: 33305

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statem for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by resolution duly adopted by its board of directors on May 9, 1988

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE Georgianna Miles DATE May 11, 198
(Registered Agent Accepting Appointment) Georgianna Miles

10. If a foreign corporation, date first transacted business in Florida: D.N.A.

11. See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer or Director of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.
(Officer or Director signing must be listed in Block 6.)

Signature: Dominic A. Borrasca
Date: May 11, 1988
Typed Name of Signing Officer or Director: Dominic A. Borrasca
Title: Secretary/Dir.
Telephone Number: 305-772-4300

12. Should you desire a certificate of status check the box

CERTIFICATE OF STATUS DESIRED ☒

$5 Additional Fee Required for a Certificate of Status

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST

# CORPORATION ANNUAL REPORT 1989

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED

[illegible] MAR -7 [illegible] 10:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Read Notice and Instructions on Other Side Before Making Entries
**Filing Fee of $35 Required — Make Checks Payable To: Secretary of State**

1. Name and Address of Corporation Principal Office

ZIP + 4

743315 4
C. & C. CONDOMINIUM ASSOCIATION, INC.
675 CYPRESS LANE
P.O. BOX 10316
WILTON MANORS, FL 33305

2. Enter Change of Address of Principal Office. PO Box Number Alone is NOT Permitted

Street Address 21

PO Box No. 22

City and State 23

Zip Code 24

3. Date of Incorporated or Qualified To Do Business in Florida 06/19/1978

4. Federal Employer Identification Number (FEI) 59-1977930

5. Date of Last Report 05/16/1988

6. Names and Street Addresses of Each Officer and Director as of December 31, 1988

| 1 Title | 2 Names of Officers and Directors | 3 Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) | 4 City and State |
|---|---|---|---|
| Corr Sec Director | GULLIKSEN, GEORGE | 6 COVENTRY WAY | WILTON MANORS, FL |
| Director | Rich Hallick<br>~~SCHAEFER, EDWIN R.~~ | 656 ~~[illegible]~~ KENSINGTON PLACE | WILTON MANORS, FL |
| President Director | Nutter, Kim<br>~~ARRUCCI, DIANNE~~ | 660 ~~664~~ KENSINGTON PLACE | WILTON MANORS, FL |
| T/D | Miles, Georgianna<br>~~WILLIAMS, CAROLYN J.~~ | 675 ~~[illegible]~~ CYPRESS LANE | WILTON MANORS, FL |
| Vice President/Director | DANDREANO, EDWARD | 667 CYPRESS LANE | WILTON MANORS, FL |
| Rec Sec/ Director | ~~RIVERA, RAE~~<br>Maria Tirado | ~~673 CYPRESS LANE~~<br>670 Kensington | WILTON MANORS, FL |

## REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

MILES, GEORGIANNA
675 CYPRESS LANE
WILTON MANORS, FL 33305

8. Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84 FL

Zip Code 85

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above named corporation, incorporated under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on February 21, 1989

I hereby accept the appointment of registered agent. I am familiar with and accept the obligations of Section 607.325 F.S.

SIGNATURE Georgianna Miles
(Registered Agent Accepting Appointment)

DATE 2/25/89

10. If a foreign corporation, date first transacted business in Florida

11. See signature instructions under instructions on reverse side of this form.

I Certify That I Am An Officer or Director of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath. (Officer or Director signing must be listed in Block 6)

Signature Georgianna Miles

Date 2/25/89

Typed Name of Signing Officer or Director Georgianna Miles

Title Treasurer

Telephone Number 305/566-8157

12. Should you desire a certificate of status check the box.

CERTIFICATE OF STATUS DESIRED ☐

$5 Additional Fee required for a Certificate of Status

C & C Condominium Assn., Inc
Board of Directors
Feb. 21, 1959

President/ Kim Hutton 660 Kensington Pl. Wilton M
Director F

Vice President/ Edward Dandreano 662 Cypress Lane Wilt
Director Manors,

Corresponding Secretary/ George Gulliksen 6 Country Way Wilto
Director Manors,

~~Recording~~ Secretary/ Marcia Ferrante 670 Kensington Place W
Director Manors

Treasurer/ Georgianna Miles 675 Cypress Lane Wilton M
Director /

Director Richard Hallick 656 Kensington Place Wilton Manor

Director Maureen Gleason 662 Kensington Place Wilton Manors, FL

FILE NOW! THIS ANNUAL REPORT WILL BE DELINQUENT AFTER JULY 1ST P5019S304

# CORPORATION ANNUAL REPORT 1990

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

◄ Read Notice and Instructions on Other Side Before Making Entries ►
**Filing Fee of $35 Required — Make Checks Payable To: Secretary of State**

1. Name and Address of Corporation Principal Office: **743315 4**

ZIP + 4 PRESORT
C. & C. CONDOMINIUM ASSOCIATION, INC.
675 CYPRESS LANE
P.O. BOX 10316
WILTON MANORS, FL 33305-3902

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2. If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box number alone is NOT sufficient. The N of the corporation can be changed only by filing an amendment

Street Address 21: 6 Coventry Way
P.O. Box No. 22:
City and State 23: Wilton Manors, FL
Zip Code 24: 33305

3. Date Incorporated or Qualified To Do Business in Florida: 06/19/1978

4. FEI Number: 59-1977930

☐ FEI Number Applied For
☐ FEI Number Not Applicable

and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

| | Title 1 | 2 Names of Officers and Directors | 3 Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) | 4 City and State |
|---|---|---|---|---|
| 1 | ~~S/D~~ | GULLIKSEN, GEORGE | 6 COVENTRY WAY | WILTON MANORS, FL |
| 1x | V/D | | | |
| 2 | D | HALLICK, RICK | 656 KENSINGTON PLACE | WILTON MANORS, FL |
| 2x | | | | |
| 3 | ~~P/D~~ | MUTTER, KIM | 660 KENSINGTON PLACE | WILTON MANORS, FL |
| 3x | D | | | |
| 4 | ~~T/D~~ | ~~MILES, GEORGIANNA~~ | ~~675 CYPRESS LANE~~ | WILTON MANORS, FL |
| 4x | P/D | Richard Fitzpatrick | 676 Kensington Pl | |
| 5 | ~~V/P/D~~ | ~~DANDREANO, EDWARD~~ | ~~687 CYPRESS LANE~~ | WILTON MANORS, FL |
| 5x | T/D | Scott Germond | 665 Cypress Lane | |
| 6 | ~~P/S/D~~ | ~~FERRANTE, MARIA~~ | ~~670 KENSINGTON PLACE~~ | WILTON MANORS, FL |
| 6x | S/D | Ruth Briney | 652 Kensington Pl | |

## REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

MILES, GEORGIANNA
675 CYPRESS LANE
WILTON MANORS, FL 33305

8. Name and Address of New Registered Agent

Name 81: George Gulliksen
Street Address 1 (Do NOT Use P.O. Box Number) 82: 6 Coventry Way
Street Address 2 (Do NOT Use P.O. Box Number) 83:
City and State 84: Wilton Manors FL.
Zip Code 85: 33305

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the Laws of the State of Florida, 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 resolution duly adopted by its board of directors on Feb. 20, 1990

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE ____________ DATE ________
(Registered Agent Accepting Appointment)

10. I 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 effects as if made under oath. I further certify that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, F.S.

Signature: George E. Gulliksen
Date: 3/7/90

Typed Name of Signing Officer or Director: George Gulliksen
Title: Vice-President
Telephone Number: 305-563-4541

desire a certificate of status check the box.
CERTIFICATE OF STATUS DESIRED ☐

$5 Additional Fee required for a Certificate of Status

**FILE NOW! CORPORATE STATUS WILL BE DELINQUENT AFTER JULY 1ST.**

CORPORATION
ANNUAL REPORT
1991

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

JUN 18 91

APPROVED
FL. DEPT. OF S
CORPORATIONS
TALLAHASSEE,
FILED

DO NOT WRITE IN THIS SPACE

**FILING FEE OF $61.25 REQUIRED**

1. Name and Mailing Address of Corporation: DOCUMENT #743315 (4)

ZIP + 4 PRESORT
C. & C. CONDOMINIUM ASSOCIATION, INC.
6 COVENTRY WAY
WILTON MANORS, FL 33305-3901

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2. If Address in Block 1 is incorrect in any way, enter the cor address below. P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment.

21 Street Address
22 P.O. Box No.
23 City and State
24 Zip Code

3. Date Incorporated or Qualified To Do Business in Florida 06/19/1978

4. FEI Number 59-1977930

☐ FEI Number Applied For
☐ FEI Number Not Applicable

5. $8.75 Additional Fee required for a Certificate of Status
CERTIFICATE OF STATUS DESIRED

6. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

| | Title<br>1 | Names of Officers and Directors<br>2 | Street Address of Each Officer and Director<br>3 (Do NOT Use Post Office Box Numbers) | City and State<br>4 |
|---|---|---|---|---|
| 1<br>1a | ~~V/P~~ P/D | GULLIKSEN, GEORGE | 6 COVENTRY WAY | WILTON MANORS, FL |
| 2<br>2a | ~~D~~<br>V/D | ~~HALLION, RICK~~<br>FERRANTE, MARIA | ~~666 KENSINGTON PLACE~~<br>670 Kensington Place | WILTON MANORS, FL |
| 3<br>3a | D | ~~NUTTER, KIM~~<br>GLEASON, MAUREEN | ~~660 KENSINGTON PLACE~~<br>662 Kensington Place | WILTON MANORS, FL |
| 4<br>4a | ~~P/D~~ | ~~FITZPATRICK, RICHARD~~ | ~~670 KENSINGTON PL~~ | ~~WILTON MANORS, FL~~ |
| 5<br>5a | T/D | GERMOND, SCOTT | 665 CYPRESS LANE | WILTON MANORS, FL |
| 6<br>6a | S/D | BRINEY, RUTH | 652 KENSINGTON PL | WILTON MANORS, FL |

**REGISTERED AGENT INFORMATION**

7. Name and Address of Current Registered Agent

GULLIKSEN, GEORGE
6 COVENTRY WAY
WILTON MANORS, FL 33305

8. Name and Address of New Registered Agent

81 Name
82 Street Address 1 (Do NOT Use P.O. Box Number)
83 Street Address 2 (Do NOT Use P.O. Box Number)
84 City FL. 85 Zip Code

9. Pursuant to the provisions of Sections 607.0502 and 607.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registere 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 607.0505, Florida Statutes.

SIGNATURE ______ (Registered Agent Accepting Appointment) DATE ______

10. I 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. I further certify that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes, and that my name appears in Block 6 or on an attachment with an address.

SIGNATURE George E. Gulliksen DATE 4/2/91

Typed Name of Signing Officer or Director: George Gulliksen

Title: Pres.

Telephone Number Daytime: (305) 563-4541

**FILING FEE OF $61.25 REQUIRED—Make Checks Payable To: Secretary of State** $8.75 Additional Fee required for a Certificate of Status

**FILE NOW! CORPORATE STATUS WILL BE DELINQUENT AFTER JULY 1ST.**

CORPORATION
ANNUAL REPORT
1992

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

JUN 15 92

APPROVED
SEC. OF STATE
CORPORATIONS DIV.
TALLAHASSEE, FLA.
FILED

DO NOT WRITE IN THIS SPACE

**FILING FEE $61.25 Make Payable To: *Secretary of State***

1. Name and Mailing Address of Corporation DOCUMENT # 743316 (4)

C. & C. CONDOMINIUM ASSOCIATION, INC.
~~6 COVENTRY WAY~~
~~FORT LAUDERDALE FL 33305-3991~~

If above address is incorrect in any way, line through the incorrect information and enter correct address in Block 2

2. If Address in Block 1 is incorrect in any way, line through the correct information and enter the correct address below. P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an Amendment.

21 Mailing Address

22 P.O. Box No. PO Box 24444

23 City and State OAKLAND PK, FL

24 Zip Code 33307

3. Date Incorporated or Qualified To Do Business in Florida 06/19/1978

3a. Date of Last Report 06/18/1991

4. FEI Number 59-1977930

☐ FEI Number Applied For

☐ FEI Number Not Applicable

5. $8.75 Additional Fee required for a Certificate of Status

CERTIFICATE OF STATUS DESIRED ☐

6. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

| | 1 Title | 2 Names of Officers and Directors | 3 Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) | 4 City and State |
|---|---|---|---|---|
| 1 | P/D | GULLIKSEN, GEORGE | 6 COVENTRY WAY | WILTON MANORS, FL |
| 2 | ~~V/D~~ | ~~FERRANTE, MARIA~~ | ~~670 KENSINGTON PL~~ | ~~WILTON MANORS, FL~~ |
| 3 | ~~D~~ | ~~GLEASON, MAUREEN~~ | ~~682 KENSINGTON PL~~ | ~~WILTON MANORS, FL~~ |
| 4 | T/D | GERMOND, SCOTT | 665 CYPRESS LANE | WILTON MANORS, FL |
| 5 | ~~S/D~~ | ~~BRINEY, RUTH~~ | ~~652 KENSINGTON PL~~ | ~~WILTON MANORS, FL~~ |
| 6 | D | PRICE, PAT | 651 CYPRESS LN | WILTON MANORS, FL |

**REGISTERED AGENT INFORMATION**

7. Name and Address of Current Registered Agent

GULLIKSEN, GEORGE
6 COVENTRY WAY
WILTON MANORS, FL 33305

8. Name and Address of New Registered Agent

81 Name

82 Street Address 1 (Do NOT Use P.O. Box Number)

83 Street Address 2 (Do NOT Use P.O. Box Number)

84 City FL

85 Zip Code

9. Pursuant to the provisions of Sections 607.0502 and 607.1503 or 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 607.0505, Florida Statutes.

SIGNATURE ______________________ DATE ______
(Registered Agent Accepting Appointment)

10. This corporation has liability for intangible tax under S. 199.032, Florida Statutes Yes ☐ No ✓ (See other side for information on intangible tax.)

11. I 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. I further certify that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607 or Chapter 617, Florida Statutes, and that my name appears in Block 6 or an attachment with an address.

**SIGNATURE** ______________________ DATE 6/8/92

Typed Name of Signing Officer or Director SCOTT GERMOND

Title TRES

Telephone Number Daytime (305) 735-9990

12. Should you wish to contribute to the Election Campaign Financing Trust Fund, check the box and include an additional $5.00 to the filing fee. ☐

Date Due: 05/01/93 Amount Due: $200.00 If After Due Date: $225.00

# CORPORATION ANNUAL REPORT 1993

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
AND
FILED
93 APR 30 AM 11:55
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

1. Name and Mailing Address of Corporation **DOCUMENT #** 743315 (4)

C & C CONDOMINIUM ASSOCATION, INC.
P.O. BOX 24444
Oakland Park, FL 33307-4444

If above mailing address is incorrect in any way, line through incorrect information and enter correction in Block 2.

3. Date Incorporated or Qualified: 06/19/1978
3a. Date of Last Report: 06/1[illegible]/1992

4. FEI Number: 59-1977930 ☐ Applied For ☐ Not Applicable

**FILING FEE $200.00** — ANNUAL REPORT $61.25 + $138.75 CORPORATION SUPPLEMENTAL FEE — MAKE CHECK PAYABLE TO DEPARTMENT OF STATE

| | |
|---|---|
| 2. Mailing Address 21 | 2a. Principal Place of Business 26 |
| Suite, Apt. #, etc. 22 | Suite, Apt. #, etc. 27 |
| City & State 23 | City & State 28 |
| Zip 24 Country 25 | Zip 29 Country 30 |

5. Certificate of Status Desired ☒ — **$8.75 Additional Fee Required**
6. Election Campaign Financing Trust Fund Contribution ☐ — **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ — **$138.75** Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☒ No

**9. Name and Address of Current Registered Agent**

GULLIKSEN, GEORGE
6 Coventry Way
Wilton Manors, FL 33305

**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 86 Country

11. Pursuant to the provisions of Sections 607.0502 and 607.1508 or 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 607.0505, Florida Statutes.

SIGNATURE ______________________ DATE ____________
Registered Agent Accepting Appointment

12. OFFICERS AND DIRECTORS

| | |
|---|---|
| 1.1 TITLE | P/D |
| 1.2 NAME | Guilliksen, George |
| 1.3 ADDRESS | 6 Coventry Way |
| 1.4 CITY-ST-ZIP | ~~Wilton Manors, FL 33305~~ |
| 2.1 TITLE | D |
| 2.2 NAME | Price, Pat |
| 2.3 ADDRESS | 651 Cypress Ln |
| 2.4 CITY-ST-ZIP | ~~Wilton Manors, FL 33305~~ |
| 3.1 TITLE | |
| 3.2 NAME | |
| 3.3 ADDRESS | |
| 3.4 CITY-ST-ZIP | |
| 4.1 TITLE | |
| 4.2 NAME | |
| 4.3 ADDRESS | |
| 4.4 CITY-ST-ZIP | |
| 5.1 TITLE | |
| 5.2 NAME | |
| 5.3 ADDRESS | |
| 5.4 CITY-ST-ZIP | |
| 6.1 TITLE | |
| 6.2 NAME | |
| 6.3 ADDRESS | |
| 6.4 CITY-ST-ZIP | |

13. OFFICERS AND DIRECTORS CHANGES

| | |
|---|---|
| 1.1 TITLE | Director |
| 1.2 NAME | |
| 1.3 ADDRESS | same |
| 1.4 CITY-ST-ZIP | |
| 2.1 TITLE | D/P |
| 2.2 NAME | Bennett, Geoffrey |
| 2.3 ADDRESS | 660 Kensington Place |
| 2.4 CITY-ST-ZIP | Wilton Manors, FL 33305 |
| 3.1 TITLE | D/VP |
| 3.2 NAME | Pierce, Sandra |
| 3.3 ADDRESS | 650 Kensington Place |
| 3.4 CITY-ST-ZIP | Wilton Manors, FL 33305 |
| 4.1 TITLE | D/Treas. |
| 4.2 NAME | Saxton, Jan |
| 4.3 ADDRESS | 4 Coventry Way |
| 4.4 CITY-ST-ZIP | Wilton Manors, FL 33305 |
| 5.1 TITLE | D/Secty |
| 5.2 NAME | Price, Howard |
| 5.3 ADDRESS | 657 Cypress Lane |
| 5.4 CITY-ST-ZIP | Wilton Manors, FL 33305 |
| 6.1 TITLE | |
| 6.2 NAME | |
| 6.3 ADDRESS | |
| 6.4 CITY-ST-ZIP | C.D. 4/30/93 |

14. I 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; I further certify that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607 or 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** Sandra Pierce DATE 4/28/93

Print/Type Name of Signing Officer or Director: SANDRA PIERCE
Title(s): DIRECTOR/VICE PRESIDENT
Daytime Telephone Number: (305) 467-7744

FOLD ◀ ▶ FOLD

**FILE NOW: FILING FEE AFTER MAY 1 IS $22[illegible]0**

# CORPORATION ANNUAL REPORT 1994

FLORIDA DEPARTMENT OF STATE
Jim [illegible]
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED
94 APR 11 AM 7:20
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DO NOT WRITE IN THIS SPACE

1. Corporation Name
C. & C. CONDOMINIUM ASSOCIATION, INC. 7433154

DOCUMENT #
74331[illegible] (4)

Mailing Address
P.O. BOX 24444
OAKLAND PK FL 33307

Principal Place of Business
P.O. BOX 24444
OAKLAND PK FL 33307

If above addresses are incorrect in any way, line through incorrect information and enter correction below.

3. Date Incorporated or Qualified: 06/19/1978
3a. Date of Last Report: 04/30/1993
4. FEI Number: 59-1977930 ☐ 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
7. Nonprofit Exempt from $138.75 Supplemental Fee ☐
8. This corporation has Liability for Intangible Tax under S. 199.032, Florida Statutes ☐ Yes ☑ No

2. Mailing Address
21
22 Suite, Apt. #, etc.
23 City & State
24 Zip
25 Country

2a. Principal Place of Business
26
27 Suite, Apt. #, etc.
28 City & State
29 Zip
30 Country

9. Name and Address of Current Registered Agent
GULLIKSEN, GEORGE
8 COVENTRY WAY
WILTON MANORS FL 33305

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 607.0502 and 607.1508 or 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 607.0505 or 617.0503, Florida Statutes.

SIGNATURE ______________________ DATE ____________
Registered Agent Accepting Appointment / Registered Agent signature required when applicable

| 12. | OFFICERS AND DIRECTORS | 13. | CHANGES TO OFFICERS AND DIRECTORS IN 12 |
|---|---|---|---|
| 11 TITLE | P/D | 11 TITLE | |
| 12 NAME | GULLIKSEN, GEORGE | 12 NAME | |
| 13 STREET ADDRESS | 8 COVENTRY WAY | 13 STREET ADDRESS | SAME |
| 14 CITY-ST-ZIP | WILTON MANORS FL | 14 CITY-ST-ZIP | |
| 21 TITLE | D | 21 TITLE | D |
| 22 NAME | PRICE, PAT | 22 NAME | HOLT, ELIZABETH |
| 23 STREET ADDRESS | 651 CYPRESS LN | 23 STREET ADDRESS | 656 Kensington PL |
| 24 CITY-ST-ZIP | WILTON MANORS FL | 24 CITY-ST-ZIP | Wilton MANORS, FL 33305 |
| 31 TITLE | D/P | 31 TITLE | D/V. |
| 32 NAME | GEOFFREY BENNETT | 32 NAME | MILLENBRUCH, BARBARA |
| 33 STREET ADDRESS | 680 KENSINGTON PL | 33 STREET ADDRESS | 678 KENSINGTON PL |
| 34 CITY-ST-ZIP | WILTON MANORS FL 33305 | 34 CITY-ST-ZIP | Wilton Manors, FL 33305 |
| 41 TITLE | D/V | 41 TITLE | D/T |
| 42 NAME | PIERCE SANDRA | 42 NAME | SAME |
| 43 STREET ADDRESS | 650 KENSINGTON PL | 43 STREET ADDRESS | |
| 44 CITY-ST-ZIP | WILTON MANORS FL 33305 | 44 CITY-ST-ZIP | |
| 51 TITLE | D/T | 51 TITLE | D/S |
| 52 NAME | SAXTON JAN | 52 NAME | MAHLER, AMANDA |
| 53 STREET ADDRESS | 4 COVENTRY WAY | 53 STREET ADDRESS | 661 CYPRESS LANE |
| 54 CITY-ST-ZIP | WILTON MANORS FL 33305 | 54 CITY-ST-ZIP | Wilton Manors, FL 33305 |
| 61 TITLE | D/S | 61 TITLE | |
| 62 NAME | PRICE HOWARD | 62 NAME | |
| 63 STREET ADDRESS | 657 CYPRESS LANE | 63 STREET ADDRESS | delete |
| 64 CITY-ST-ZIP | WILTON MANORS FL 33305 | 64 CITY-ST-ZIP | |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I release the Division of Corporations from any liability of non-compliance with Section 119.07(3)(i) in the event that the information supplied is deemed exempt from public access. 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 have fulfilled all obligations concerning unclaimed property imposed by Chapter 717, Florida Statutes; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607 or 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: Sandra Piera / SANDRA Pierce 4/5/94 305-467-7744
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Daytime Phone #

## FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION
ANNUAL REPORT
1995

FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 APR 13 PM 3:06

DOCUMENT # 743315 (4)

1. Corporation Name

**C. & C. CONDOMINIUM ASSOCIATION, INC.**

Principal Place of Business
P.O. BOX 24444
OAKLAND PK FL 33307

Mailing Address
P.O. BOX 24444
OAKLAND PK FL 33307

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/19/1978

3a. Date of Last Report: 04/11/1994

4. FEI Number: 59-1977930 ☐ 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

7. Non-profit with IRS 501(c)(3) Tax Exempt Status ☐ $68.75 Supplemental Fee Not Required

8. This corporation has liability for intangible tax under S.199.032, Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business
21
Suite, Apt. #, etc.
22
City & State
23
Zip 24
Country 25

2a. Mailing Address
26
Suite, Apt. #, etc.
27
City & State
28
Zip 29
Country 30

9. Name and Address of Current Registered Agent

GULLIKSEN, GEORGE
6 COVENTRY WAY
WILTON MANORS FL 33306

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE
(Typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when reinstating) DATE

| 12. | OFFICERS AND DIRECTORS | 13. | ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS | |
|---|---|---|---|---|
| TITLE | PD | 11 TITLE | ~~PD~~ D | ☒ Change ☐ Ad |
| NAME | GULLIKSEN, GEORGE | 12 NAME | ~~MAHLER, AMANDA~~ | |
| STREET ADDRESS | 6 COVENTRY WAY | 13 STREET ADDRESS | ~~661 Cypress Lane~~ | |
| CITY-ST-ZIP | WILTON MANORS FL | 14 CITY-ST-ZIP | ~~Wilton Manors FL 33305~~ | |
| TITLE | D | 21 TITLE | | ☐ Change ☐ Ad |
| NAME | HOLT, ELIZABETH | 22 NAME | | |
| STREET ADDRESS | 656 KENSINGTON PL | 23 STREET ADDRESS | | |
| CITY-ST-ZIP | WILTON MANORS FL | 24 CITY-ST-ZIP | | |
| TITLE | DV | 31 TITLE | D | ☒ Change ☐ Ad |
| NAME | MILLENBRUCH, BARBARA | 32 NAME | | |
| STREET ADDRESS | 678 KENSINGTON PL | 33 STREET ADDRESS | | |
| CITY-ST-ZIP | WILTON MANORS FL | 34 CITY-ST-ZIP | | |
| TITLE | DT | 41 TITLE | | ☐ Change ☐ Ad |
| NAME | PIERCE, SANDRA | 42 NAME | | |
| STREET ADDRESS | 650 KENSINGTON PL | 43 STREET ADDRESS | | |
| CITY-ST-ZIP | WILTON MANORS FL | 44 CITY-ST-ZIP | | |
| TITLE | DS | 51 TITLE | DS/DP | ☒ Change ☐ Ad |
| NAME | MAHLER, AMANDA | 52 NAME | | |
| STREET ADDRESS | 661 CYPRESS LANE | 53 STREET ADDRESS | | |
| CITY-ST-ZIP | WILTON MANORS FL | 54 CITY-ST-ZIP | | |
| TITLE | D | 61 TITLE | DV | ☐ Change ☒ Ad |
| NAME | | 62 NAME | Stones, Robert | |
| STREET ADDRESS | | 63 STREET ADDRESS | 668 Kensington PL | |
| CITY-ST-ZIP | | 64 CITY-ST-ZIP | Wilton Manors FL 33305 | |

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Sandra Pierce, Treasurer 4/4/95 305-467-7
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
Daytime Phone #