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 29, 1999 8:00 am
Secretary of State
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DOCUMENT # 743658

1. Corporation Name

LIGHTHOUSE POINT GARDENS NORTH CONDOMINIUM ASSOC IATION, INC.

Principal Place of Business	Mailing Address
1951 N.E. 39TH STREET LIGHTHOUSE POINT FL 33064	1951 N.E. 39TH STREET LIGHTHOUSE POINT FL 33064

2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualifed 07/20/1978
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-1201636 ☐ Applied For ☐ Not Applicable
City & State 23	City & State 28	5. Certifcate of Status Desired ☐ **$8.75** Additional Fee Required
Zip / Country 24 / 25	Zip / Country 29 / 30	6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
BECKER POLIAKOFF & STREITFELD, P.A. 3111 STIRLING RD. FT. LAUDERDALE FL 33312	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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	PD	☒ DELETE	1.1 TITLE	PD	☐ Change ☒ Addition
NAME	FERSTLE, GEOGE		1.2 NAME	GARY AVERY	
STREET ADDRESS	1951 NE 39TH ST		1.3 STREET ADDRESS	1951 N.E. 39th Street	
CITY-ST-ZIP	LIGHTHOUSE PT, FL 00000		1.4 CITY-ST-ZIP	LIGHTHOUSE PT,FL 33064	
TITLE	VPD	☒ DELETE	2.1 TITLE	D	☒ Change ☐ Addition
NAME	FRYNS, ELSIE		2.2 NAME	ELSIE FRYNS	
STREET ADDRESS	1951 N E 39TH ST		2.3 STREET ADDRESS	1951 N.E. 39th Street	
CITY-ST-ZIP	LIGHTHOUSE PT, FL 00000		2.4 CITY-ST-ZIP	LIGHTHOUSE PT,FL 33064	
TITLE	SD	☐ DELETE	3.1 TITLE	SD	☐ Change ☒ Addition
NAME	ROSS, BETTY		3.2 NAME	PATRICIA HOLECEK	
STREET ADDRESS	1951 NE 39TH STREET		3.3 STREET ADDRESS	1951 N.E. 39th Street	
CITY-ST-ZIP	LIGHOUSE POINT FL 33064		3.4. CITY-ST-ZIP	LIGHTHOUSE PT,FL.33064	
TITLE	TD	☐ DELETE	4.1 TITLE	D	☒ Change ☐ Addition
NAME	FRYNS, EDWARD		4. 2 NAME	EDWARD FRYNS	
STREET ADDRESS	1951 N E 39TH ST		4.3 STREET ADDRESS	1951 N.E. 39th Street	
CITY-ST-ZIP	LIGHTHOUSE PT, FL 00000		4.4 CITY-ST-ZIP	LIGHTHOUSE PT,FL. 33064	
TITLE	ASAV	☐ DELETE	5.1 TITLE	VPD	☒ Change ☐ Addition
NAME	MURTHA, BARBARA		5.2 NAME	BARBARA MURTHA	
STREET ADDRESS	1951 N E 39TH ST		5.3 STREET ADDRESS	1951 N.E. 39th Street	
CITY-ST-ZIP	LIGHTHOUSE POINT FL		5.4 CITY-ST-ZIP	LIGHTHOUSE PT,FL. 33064	
TITLE	D	☐ DELETE	6.1 TITLE	TD	☒ Change ☐ Addition
NAME	RIGGS, DOLORES		6.2 NAME	DOLORES RIGGS	
STREET ADDRESS	1951 NE 39TH STREET		6.3 STREET ADDRESS	1951 N.E.39th Street	
CITY-ST-ZIP	LIGHTHOUSE POINT FL 33064		6.4 CITY-ST-ZIP	LIGHTHOUSE PT,FL. 33064	

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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: Barbara SIGNATURE REQUIRED 3/25/99 (954) 785-4952 H
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

(954) 943-0660