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NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State **DIVISION OF CORPORATIONS**

DOCUMENT # 743893

1. Corporation Name

TOP OF THE MILE, INC.

Principal Place of Business

C/O UNITED COMMUNITY MGT. CORP 3300 UNIVERSITY DRIVE #405 CORAL SPRINGS FL 33065

Mailing Address

C/O UNITED COMMUNITY MGT. CORP 3300 UNIVERSITY DRIVE #405 **CORAL SPRINGS FL 33065**

FILED Mar 29, 1999 8:00 am Secretary of State

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2. Principal Pl	ace of Business	2a. Mailing Address			3. Date Incorporated or Qualifed 08/08/1978		
21		26					liad Fan
Suite, Apt.	#, etc.	Suite, Apt. #, etc.			4. FEI Number 59-1859047		lied For
22		27			39 1039047		Applicable
City & State City & State					5. Certifcate of Status Desired	\$8.75 A	
23 28			_			Fee Re	quired
Zip	Country Zip		Country		6. Election Campaign Financing	\$5.00	vlay Be
24	25 29		30		Trust Fund Contribution	Added to	Fees
9. Name and Address of Current Registered Agent					10. Name and Address of New Registered	d Agent	
			81	Name			
LINITED COMMINITY MANACEMENT CODE					had been seen as a second second seen as a second second seen as a second secon		
UNITED COMMUNITY MANAGEMENT CORP				Street Addre	ess (P.O. Box Number is Not Acceptable)		
3300 UNIVERSITY DRVIE							
CORAL SPRINGS FL 33065							
				City	F	85 Zip C	ode
34 -	10 4 250	1047 4500 Flands State	***	named same	-		registered
office or n	to the provisions of Sections 617.0502 egistered agent, or both, in the State of m familiar with, and accept the obligation	f Florida. Such change was aut	nonzed by	tne corporation	oration submits this statement for the purpose on's board of directors. I hereby accept the appropriate the purpose of the pur	ointment as reg	istered
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable. (NOTE: F	Registered Ager	t signature required	when reinstating) DATE		
12.	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFICERS A	ND DIRECTO	RS IN 12
TITLE	PD	☐ DELETE	1.1 TITLE			Change	Addition
NAME	SKAROFF, FRED		1.2 NAME				
	4013 OCEAN DR #104		1.3 STREET	ADODESS			
STREET ADDRESS							
CITY-ST-ZIP	LAUD BY THE SEA FL 33308		1.4 CITY-ST-ZIP			Change	Addition
TITLE	DVP DELETE		2.1 TITLE			[] Change	
NAME	DANIEL, ABBATE		2.2 NAME	1			
STREET ADDRESS	4013 N. OCEAN BLVD. #201		2.3 STREET	ADDRESS	•		
CITY-ST-ZIP	LAUD BY THE SEA FL 33308		2. 4 CITY-8	T-ZIP			
TITLE	STD DELETE		3.1 TITLE			Change	☐ Addition
NAME	SCHREIBER, PHYLLIS		3.2 NAME		•		
	4013 OCEAN BLVD. #315		3.3 STREET	ADORESS			
STREET ADDRESS	LAUDERDALE BY-SEA FL 33308				*		
CITY-ST-ZIP	PAODEUDATE DI-SEN LE 33300	. DELETE	3.4. CITY-S	1-219		Change	Addition
TITLE		, 13051616	4.1 TITLE	ľ		C. 490	
NAME			4, 2 NAME				
STREET ADDRESS			4.3 STREE	ADDRESS			i
CITY-ST-ZIP			4.4 CITY-S	r-ZIP			
TITLE		☐ DELETE	5.1 TITLE			Change	Addition
NAME	·		5.2 NAME				
STREET ADDRESS			5.3 STREET	ADDRESS		.	
CITY-ST-ZIP			5.4 CITY-S	T-ZIP		_	
TITLE		☐ DELETE	6.1 TITLE			Change	☐ Addition
			6.2 NAME				
NAME			6.3 STREE	ADDRESS			
STREET ADDRESS			6.4 CITY-S				
CITY-ST-ZIP	l de al a la l	this files does not suchfife for			ection 119.07(3)(i), Florida Statutes. I further c	ertify that the i	formation
14. Inereby (remity inai ibe information subblied With	i tris illing goes not gualify for i	uie exembl	un stateu ili Si	recurri i 19.07 (3)(1), 1 ionua siaiules. I lui liiei C	~	

Indicated on this annual report or supplied with this limit does not quality for the exemption stated in Section 18.50 (3), 18.50 educated and the same legal effect as if made under oath; that I am an officer or director of the corporation or the execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or of ran attachment with an appears with all other tips impowered.

SIGNATURE: