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Mar 12 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 745115 (6)

1. Corporation Name
ISLES OF TAMARAC HOMEOWNER'S ASSOCIATION, INC.



Principal Place of Business 10500 NW 70TH STREET TAMARAC FL 33321	Mailing Address 10500 NW 70TH STREET TAMARAC FL 33321
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3. Date Incorporated or Qualified 12/01/1978	
4. FEI Number 59-2182308	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country
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9. Name and Address of Current Registered Agent

**POLIAKOFF, GARY A
C/O BECKER & POLIAKOFF, P.A.
3111 STIRLING ROAD
FORT LAUDERDALE FL 33312**

10. Name and Address of New Registered Agent

81 Name	
82 Street Address (P.O. Box Number is Not Acceptable)	
83	
84 City	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 _____ (NOTE: Registered Agent signature required when reinstating) _____ DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VDP KORNFELD, ARTHUR 7012 NW 107 AVE TAMARAC, FL 00000 33321	1.1 TITLE	D FUCHS, HENRY 16501 - NW, 70th ST TAMARAC, FL. 33321
TITLE	D GOLLUBIER, ADRIAN 10306 NW 71 PALCE TAMARAC FL 33321	2.1 TITLE	D FROELICH, FRITZ 10621 - N.W. 71 CT. TAMARAC, FL. 33321
TITLE	D BERNSTEIN, DOROTHY 7011 NW 104 AVENUE TAMARAC FL 33321	3.1 TITLE	D VANCHOFF, NICK 10020 - N.W. 71 CT. TAMARAC, FL. 33321
TITLE	TD PARNES, IRVING 10324 NW 71ST PLACE TAMARAC, FL 00000 33321	4.1 TITLE	
TITLE	PD SIEGEL, MILTON 10114 NW 71 ST TAMARAC FL 33321	5.1 TITLE	
TITLE	SD LEICHTUNG, DAVID 7125 NW 100 TERRACE TAMARAC, FL 00000 33321	6.1 TITLE	

1.2 NAME	1.3 STREET ADDRESS	1.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	2.3 STREET ADDRESS	2.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.

SIGNATURE: Irving Parnes IRVING PARNES 3/7/98 (954) 721-8883

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