

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
May 10, 1999 8:00 am
Secretary of State

05-10-1999 90288 045 ****61.25

DOCUMENT # 745340

1. Corporation Name

BUILDING 1B OF COUNTRY CLUB APARTMENTS AT BONAVENTURE 32 CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

16400 GOLF CLUB RD.
#313
FT. LAUDERDALE FL 33326-1444

Mailing Address

16400 GOLF CLUB RD.
#313
FT. LAUDERDALE FL 33326-1444

540227 - 90288 - 45



2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

WESTON, FL 33326

24 Zip Country

25

2a. Mailing Address

26 Suite, Apt. #, etc.

28 City & State

WESTON, FL 33326

29 Zip Country

30

3. Date Incorporated or Qualified

12/21/1978

4. FEI Number

59-1913096

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing ☐

\$5.00 May Be
Added to Fees

10. Name and Address of New Registered Agent

9. Name and Address of Current Registered Agent

NORDE MGNT CO
6047 KIMBERLY BLVD
SUITE N
FT. LAUDERDALE FL 33068

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 D ☐ DELETE

NAME SCHWARTZ, ROY
STREET ADDRESS 16400 GOLF CLUB RD., #111
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE PD ☐ DELETE

NAME MONTANA, PETER
STREET ADDRESS 16400 GOLF CLUB RD., #213
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE VD ☐ DELETE

NAME BANDER, SHELDON
STREET ADDRESS 16400 GOLF CLUB RD., #212
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE D ☐ DELETE

NAME BEREBSKY, DAVID
STREET ADDRESS 16400 GOLF CLUB RD., #201
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE D ☐ DELETE

NAME NESTLER, BERTRAM
STREET ADDRESS 16400 GOLF CLUB ROAD #203
CITY-ST-ZIP FT. LAUDERDALE FL

TITLE STD ☐ DELETE

NAME ALMENDOS, MARIA
STREET ADDRESS 16400 GOLF CLUB ROAD #313
CITY-ST-ZIP FORT LAUDERDALE FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE D ☐ Change ☒ Addition

1.2 NAME SEMERIA, AUGUSTINE
1.3 STREET ADDRESS 16400 GOLF CLUB RD., #104
1.4 CITY-ST-ZIP WESTON, FL

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

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

Date

Daytime Phone #

CR2E037 (11/98)