## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

**FILED** 

Feb 26 1997 8:00am

Secretary of State

(96/6)

962-2712

Secretary of State \*\*
DIVISION OF CORPORATIONS

DOCUMENT #

746932

SIGNATURE AND TYPED OR PRINTED

(3)

ESTATES OF FORT LAUDERDALE PROPERTY OWNERS ASSOCIATION, INC.

Principal Place of Business Mailing Address 2850 S.W. 54TH STREET 2850 S.W. 54TH STREET FT LAUDERDALE FL 33312 FT LAUDERDALE FL 33312-6510 3. Date Incorporated or Qualified 3a. Date of Last Report 04/27/1979 06/17/1996 2. Principal Place of Business 4. FEI Number 2a. Mailing Address Applied For 59-1911519 21 26 Not Applicable Suite, Apt #, etc Suite, Apt. #, etc. \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Zip 8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No Country 24 25 29 30 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name **RECKER & POLIAKOFF, P.A.** 62 Street Address (P.O. Box Number is Not Acceptable) 3111 STIRLING ROAD вэ FT LAUDERDALE FL 33312 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) OFFICERS AND DIRECTORS 13. 12. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 DELETE TITLE PD 1.1 TITLE Change Addition LECONCHE, CARMELA NAME 1.2 NAME 5461 SW 32ND TERRACE STREET ADDRESS 1.3 STREET ADDRESS FT LAUDERDALE FL €ITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE ☐ Change 2.1 TITLE Addition STOLLER, MERRILL NAME 2.2 NAME 2929 LAKESHORE DR. STREET ADDRESS 2.3 STREET ADDRESS FT. LAUDERDALE FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP XX DELETE TITLE Change 3.1 TITLE Addition CORREIA, ANTONE NAME 3.2 NAME RAYMOND BELLEMARE 2660 E. MARINA DR. STREET ADDRESS 3.3 STREET ADDRESS 5591 SW 32nd TERRACE FT. LAUDERDALE FL CITY-ST-ZIP 3.4 CITY-ST-7IP FT. LAUDERDALE DELETE TITLE 4.1 TITLE Change Addition SAGLIO, PETER NAME 4.2 NAME 5450 HIACINTH CT. STREET ADDRESS 4.3 STREET ADDRESS FT. LAUDERDALE FL CITY-ST-ZIP 4.4 CITY-ST-ZIP XX DELETE TITLE 5.1 TITLE SECRETARY **X** X Change Addition **BOEHM, JOHN** NAME **5.2 NAME** NADINE STANGO STREET ADDRESS 5420 HIACINTH CT. 2830 SW 57th Ct 5.3 STREET ADDRESS FT. LAUDERDALE FL FT. LAUDERDALE, FL. CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE TITLE 61 TITLE ☐ Change Addition NAME SCALISE, VINCENT 6.2 NAME STREET ADDRESS 2670 SW 54th Place 6.3 STREET ADDRESS CITY-SI-ZIP Ft. LAUDERDALE, FI. 64 CITY-SI-ZIP

14. I do 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 poort 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.