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NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 748004

1. Corporation Name

LAS OLAS VILLAS CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

1770 E. LAS OLAS BLVD
FT. LAUDERDALE FL 33301
US

Mailing Address

2410 SE 17TH ST
FT. LAUDERDALE FL 33316
US



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified
07/09/1979

21 Suite, Apt. #, etc.

26 1220 MIAMI RD

4. FEI Number
59-1929060

Applied For
Not Applicable

22 City & State

27 SUITE #6
28 FT LAUDERDALE, FLA

5. Certificate of Status Desired

\$8.75 Additional Fee Required

23 Zip Country

29 33316 30 USA

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

SHOOP, THOMAS V
2410 SE 17TH ST
FORT LAUDERDALE FL 33316

81 Name THOMAS V. SHOOP

82 Street Address (P.O. Box Number is Not Acceptable)
1220 MIAMI RD.

83 SUITE #6

84 City FT LAUDERDALE FL 85 Zip Code 33316

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 *Thomas V. Shoop* THOMAS V. SHOOP MANAGER 2-1-99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

T DELETE
NAME KENDALL, LESTER
STREET ADDRESS 1770 E LAS OLAS BLVD
CITY-ST-ZIP FT LAUDERDALE FL

1.1 TITLE Change Addition
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

VP DELETE
NAME BARBOSA, JAIME
STREET ADDRESS 1770 E. LAS OLAS BLVD.
CITY-ST-ZIP FT. LAUDERDALE FL

2.1 TITLE Change Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

DVP DELETE
NAME KESSLER, BERNARD
STREET ADDRESS 1770 E. LAS OLAS BLVD
CITY-ST-ZIP FT. LAUDERDALE FL

3.1 TITLE Change Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

D DELETE
NAME LEANDER, WALTER
STREET ADDRESS 1770 E. LAS OLAS BLVD
CITY-ST-ZIP FT. LAUDERDALE FL

4.1 TITLE Change Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

D DELETE
NAME FRIEL, DONNA MARIE
STREET ADDRESS 1770 E LAS OLAS BLVD
CITY-ST-ZIP FT LAUDERDALE FL

5.1 TITLE Change Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

D DELETE
NAME CHRISTENSEN, LEONOR
STREET ADDRESS 1770 E LAS OLAS BLVD
CITY-ST-ZIP FT LAUDERDALE FL

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: *Thomas V. Shoop* SIGNATURE REQUIRED President 2/4/99
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #

CR2E037 (1/198)