

FILE NOW: FILING FEE IS \$61.25

FILED  
Apr 06 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Morham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 748150 (0)**  
 1. Corporation Name  
**TURNBERRY ISLE SOUTH CONDOMINIUM ASSOCIATION, INC.**



Principal Place of Business <b>19667 TURNBERRY WAY NORTH MIAMI BEACH FL 33180</b>	Mailing Address <b>19667 TURNBERRY WAY NORTH MIAMI BEACH FL 33180</b>
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3. Date Incorporated or Qualified <b>07/20/1979</b>	
4. FEI Number <b>59-1980227</b>	Applied For <input type="checkbox"/> Not Applicable
5. Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

2. Principal Place of Business <b>21</b>	2a. Mailing Address <b>26</b>
Suite, Apt. #, etc. <b>22</b>	Suite, Apt. #, etc. <b>27</b>
City & State <b>23</b>	City & State <b>28</b>
Zip <b>24</b>	Country <b>25</b>
Zip <b>29</b>	Country <b>30</b>

9. Name and Address of Current Registered Agent  
**PATRONE, LEE BLDG MGR.  
 4925 COLLINS AVE 6F  
 MIAMI BCH FL 33140**

10. Name and Address of New Registered Agent <b>81</b> Name	
<b>82</b> Street Address (P.O. Box Number is Not Acceptable)	
<b>83</b>	
<b>84</b> City	<b>85</b> 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: LEE PATRONE, MANAGER DATE: 3-31-98

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	<b>D</b> <input type="checkbox"/> DELETE	1.1 TITLE	<b>VD</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>LIEBERMAN, JEROME</b>	1.2 NAME	<b>Lieberman, Jerome</b>
STREET ADDRESS	<b>19667 TURNBERRY WAY</b>	1.3 STREET ADDRESS	<b>19667 Turnberry Way</b>
CITY-ST-ZIP	<b>N MIAMI BCH FL</b>	1.4 CITY-ST-ZIP	<b>Aventura, Fl. 33180</b>
TITLE	<b>PD</b> <input checked="" type="checkbox"/> DELETE	2.1 TITLE	<b>D</b> <input checked="" type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	<b>KOGAN, FRED</b>	2.2 NAME	<b>Harry Friedman</b>
STREET ADDRESS	<b>19667 TURNBERRY WAY</b>	2.3 STREET ADDRESS	<b>19667 Turnberry Way</b>
CITY-ST-ZIP	<b>N MIAMI BCH FL</b>	2.4 CITY-ST-ZIP	<b>Aventura, Fl. 33180</b>
TITLE	<b>SD</b> <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>HABER, HENRY</b>	3.2 NAME	
STREET ADDRESS	<b>19667 TURNBERRY WAY</b>	3.3 STREET ADDRESS	
CITY-ST-ZIP	<b>N MIAMI BCH FL</b>	3.4 CITY-ST-ZIP	
TITLE	<b>PD</b> <input type="checkbox"/> DELETE	4.1 TITLE	<b>VD</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>SHERMAN, DONALD</b>	4.2 NAME	<b>Sherman, Donald</b>
STREET ADDRESS	<b>19667 TURNBERRY WAY</b>	4.3 STREET ADDRESS	<b>19667 Turnberry Way</b>
CITY-ST-ZIP	<b>N MIAMI BCH FL</b>	4.4 CITY-ST-ZIP	<b>Aventura, Fl. 33180</b>
TITLE	<b>VD</b> <input type="checkbox"/> DELETE	5.1 TITLE	<b>PD</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>GROSSBARDT, HAROLD</b>	5.2 NAME	<b>Grossbardt, Harold</b>
STREET ADDRESS	<b>19667 TURNBERRY WAY</b>	5.3 STREET ADDRESS	<b>19667 Turnberry Way</b>
CITY-ST-ZIP	<b>N MIAMI BCH FL</b>	5.4 CITY-ST-ZIP	<b>Aventura, Fl. 33180</b>
TITLE	<b>VD</b> <input type="checkbox"/> DELETE	6.1 TITLE	<b>TD</b> <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	<b>WALDMAN, LEO</b>	6.2 NAME	<b>Waldman, Leo</b>
STREET ADDRESS	<b>19667 TURNBERRY WAY</b>	6.3 STREET ADDRESS	<b>19667 Turnberry Way</b>
CITY-ST-ZIP	<b>N MIAMI BCH FL</b>	6.4 CITY-ST-ZIP	<b>Aventura, Fl. 33180</b>

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: Harold "Nobby" Grossbardt Date: March 31, 98

CR2E087 (10/97)