

FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Matham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 750205 (7)

1. Corporation Name

STONEBRIDGE GARDENS, SECTION ONE, CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business

Mailing Address

2900 NORTHWEST 55TH AVE.
LAUDERHILL FL 33313

2900 NORTHWEST 55TH AVE.
LAUDERHILL FL 33313

3. Date Incorporated or Qualified
12/13/1979

3a. Date of Last Report
07/07/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

28 City & State

24 Zip 25 Country

29 Zip 30 Country

4. FEI Number
59-2085864

Applied For
Not Applicable

5. Certificate of Status Desired

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PROCTOR, LLOYD W
400 SE 18 STREET
FT. LAUDERDALE FL 33316

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's signature required when re-appointing)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PD
NAME KAMERMAN, SY DELETE
STREET ADDRESS 2900 NW 55TH AVENUE
CITY-ST-ZIP LAUDERHILL FL

11 TITLE President D Change Addition
12 NAME Andres J. Castellon
13 STREET ADDRESS 2900 NW 55 Ave
14 CITY-ST-ZIP Lauderhill, FL 33313

TITLE VT
NAME BANKS, DAVE DELETE
STREET ADDRESS 2900 NW 55TH AVENUE
CITY-ST-ZIP LAUDERHILL FL

21 TITLE Vice President - Treasurer D Change Addition
22 NAME Jean Marie (Jay) Feuillet
23 STREET ADDRESS 2900 NW 55 Ave
24 CITY-ST-ZIP Lauderhill, FL 33313

TITLE SD
NAME MARKS, JEFFREY DELETE
STREET ADDRESS 2900 NW 55 AVENUE
CITY-ST-ZIP LAUDERHILL FL

31 TITLE Change Addition
32 NAME
33 STREET ADDRESS
34 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

41 TITLE Change Addition
42 NAME
43 STREET ADDRESS
44 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

51 TITLE 600001856898 Change Addition
52 NAME -06/10/96--01021--002
53 STREET ADDRESS ***61.25
54 CITY-ST-ZIP

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

61 TITLE Change Addition
62 NAME
63 STREET ADDRESS
64 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

(Signature) J M FEUILLET

04/29/96 9547346082

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)

(Handwritten initials) 5-1-96