FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

752720

(3)

COUNTRY WALK ESTATE HOMES ASSOCIATION, INC.

Principal Place of Business

Mailing Address

12079 S.W. 131 AVENUE MIAMI FL 33186 14601 COUNTRY WALK DR. MIAMI FL 33186-5611

FILED May 05 1997 8:00am Secretary of State



									3. Date Incorporated or Qualified 3a. Date of Last Report 06/02/1980 03/25/1996			
2. Principal Place of Business					2a. Mailing Address					4. FEI Number Applied For		
21					26					59-2025974 Not Applicable		
	Suite, Apt. #, etc.				Suite, Apt. #, etc.					¢0.75		
22	22				27					5. Certificate of Status Desired Fee Required		
City	City & State				City & State					6. Election Campaign Financing \$5.00 May Be		
23				28	28					Trust Fund Contribution Added to Fees		
Zip		Country			Zip Cour			try		8. This corporation has liability for intangible tax under s. 199.032,		
24	25			29]	30				Florida Statutes Yes No		
	9. Nam	and	d Address of Current	Regi	stered Agent				10. Name and Address of New Registered Agent			
						•	81 Name					
SK	SKRLD, INC.							Ctrool	set Address /P.O. Boy Number is Not Acceptable)			
SNHLU, INC. 201 ALHAMBRA CIRCLE . 82 Street Address (P.O. Box Number is Not Acceptable)							ess (P.O. Box Number is Not Acceptable)					
	ITE 1102		ala ·				83					
)RAL GABLES F	1 22	1134									
- 50	TIME ORDECO I	LOC	7104				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.											
SIGNAT		d or n	inted name of registered agen	tit boat	In if socileable (NOT	F: Banislare	nd Agon	l cionaliue		rd when reinstating) DATE		
12.	organisto, type	p.	OFFICERS AND			13.	_	i bigitatuiç	regorea	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	D		017102701412		X DELETE	111		• • • • • •	PD			
NAME	KHAN,	RFF	7Δ		•••	1	NAME			hr, Harold		
STREET AL			44 TERRACE				ADDRESS 14601 Country Walk Drive					
	CITY-ST-ZIP MIAMI FL 33196				140					ami, F1. 33186		
TITLE	VD VD				DELETE 2176			- 215				
NAME	LAKE, SKY				22 N				VD	,		
	STREET ADDRESS 14110 S.W. 145 TERRACE								oung, Charles			
	CITY-ST-ZIP MIAMI FL 33186							Y-ST-ZIP Miar		601 Country Walk Drive		
TITLE	PD PD				▼ DELETE 31 T			1-ZIP	1	ami, F1. 33186		
NAME		ICH.	NDD.		OD PERCE	32 N			TD	. A		
	LET ADDRESS 14875 S.W. 145 STREET							000000		einzen, Ken		
								ADDRESS	$\frac{14}{3}$	601 Country Walk Drive		
CITY-ST-	VD VD	LO	3 180		X DELETE	411	CITY-ST	- 2112		ami, F1. 33186		
NAME	FIGEROA JOSEPH, SELVA				DELCTE		رن ا		SD	ertrand, Lisa Marie		
	TREET ADDRESS 14678 S.W. 139 PLACE							IDDDC00				
	*****							ADDRESS		601 Country Walk Drive		
CITY-ST-	TD MIAMI	<u> </u>	3100		DELETE	5.11	CITY-ST	- ZIP		ami, F1. 33186		
NAME					5.21				VP	•		
	B .							DDDDDD		onte-Uss, Vianey		
	STREET ADDRESS 148678 S.W. 139 PLACE							ADDRESS	14001 Councily wark bilde			
CITY-ST-		-L 3	3 100		54 CF			- ZIP		ami, F1. 33186		
TITLE	1 00				(X) DELETE	ITLE	. "		☐ Change 🙀 Addition			
NAME	011201122, 001111				6.2 N			Fa		tterson, Bob		
STREET AD			144 TERRACE			STREET A	ADDRESS	14	601 Country Walk Drive			
CITY-ST-			* * * * * * * * * * * * * * * * * * * *	1	Alata Africa and a construction of		CITY-ST		Mi	ami, F1. 33186		
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 receivor or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 33/ii changed, or on an approximent with an address.												