FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State **DIVISION OF CORPORATIONS**

1998 DOCUMENT #

Principal Place of Business

752759

(1)

Mailing Address

THE CYPRESS AT WOODMONT - III CONDOMINIUM ASSOCI ATION, INC.

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3475 HIATUS RD		3475 HIATUS RD			3. Date Incorporated or Qualified		
SUNRISE FL 33351		SUNRISE FL 33351			06/03/1980		
US		US			4. FEI Number	 T -	Applied For
1					59-2278562	<u> </u>	Not Applicable
2. Principal Place of Business 2a. Mailing Address						\$8.7	5 Additional
21		26		5. Certificate of Status Desired		e Required	
Suite, Apt. #, etc. Suite, Apt.			t. #, etc.		6. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
22		27					
City & State		City & State			7. Is this nonprofit corporation a homeown	ers associa	ation?
23		28			☐ Yes	☐ No	
Zip	Country	Zip	Country		8. This corporation owes or has paid the ci	urrent year	r Intangible
24	25	29	30		Personal Property Tax due June 30.	Yes	□ No
	Name and Address of Current	Registered Agent			10. Name and Address of New Registered	Agent	
	 _		81	Name			
WALDRON HI, MICHAEL H.			82		colm H. Waldron, III dress (P.O. Box Number is Not Acceptable)		
3475 HIATUS			62	SUBBL AGE	3475 Hiatus Road		
SUNRISE FL 33351					JA BIALUS KORO		
OUTHING TE	33371						
	, /		84	City	FI	85 2	Zip Code
11 Durament to the	provision of Sections 517 0500	and 617 1509 Florida Ptotute	na tha abaya	nomad on		et obeneir	33351
office or registe	red agent, or bein, in the State	of Florida. Such change was a	outhorized by t	he corpora	rporation submits this statement for the purpose ation's board of directors. I hereby accept the ap	pointment	t as registered
agent. I am fam	niliar with, and accept the obliga	tions of, Section 617.0503, Flo	orida Statutes.	· ·	1.1.1	1	_
SIGNATURE	MA // Will the				4/6/9	<u> </u>	·
	typed by pripled name of registered ager			signatura requ	ulred when reinstating)	ID DIDECT	7000 0140
12.	// OFFICERS AND	DELETE	13.		ADDITIONS/CHANGES TO OFFICERS AN	Chan	
		C DECEIE	1.1 TITLE			LI Chair	Ne - Addition
	ARDIGAN, GREG		1.2 NAME				
I I I I I I I I I I I I I I I I I I I	10 WOODMONT TER #202		1.3 STREET A	DDRESS			
	MARAC FL		1.4 CITY-ST-	ZIP			
TITLE D		☐ DELETE	2.1 TITLE			☐ Chan	nge 🔲 Addition
name KA	krson, lorraine		22 NAME				
STREET ADDRESS 74	10 WOODMONT TER. #101		2.3 STREET AL	DORESS			
CITY-ST-ZIP TA	MARAC FL		2. 4 CITY-ST	- ZIP			
TITLE PO)	☐ DELETE	3.1 TITLE			Chan	nge
NAME MA	ARBLESTON, ANSEL		3.2 NAME				
	60 WOODMONT TER. #106		3.9 STREET AL	DDRESS			
	MARAC FL		3.4. CITY-ST-				
TITLE SD		DELETE	4.1 TITLE			Chan	nge Addition
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	FANY, CRISTA		4.2 NAME				/
l	68 WOODMONT TERR #20!		4.3 STREET A	DOBESS			
	MARAC FL	•					
CITY-ST-ZIP IA		DELETE	5.1 TITLE	ZIP	<u> </u>	Chan	nge Addition
1 1 17				İ			an Interport
	JRCZ, EDWARD		5.2 NAME				
l 1	60 WOODMONT TER. #104		5.3 STREET AL				
	MARAC FL		5.4 CITY-ST-	ZIP			1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
TITLE		☐ DELETE	6.1 TITLE			Chan	nge Addition
NAME			6.2 NAME	1			
STREET ADDRESS			6.3 STREET AL	DDRESS			
A1757 AT 715	\sim		A 4 A 171 AT				

on 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 is 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 ion or the receiver or trigstee empowered to execute this report as required by Chapter \$17). Florida Statutes; and that my name appears in

FILED

Apr 16 1998 8:00am

Secretary of State