

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



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

**FILED**  
**Mar 10, 1999 8:00 am**  
**Secretary of State**

03-10-1999 90083 042 \*\*\*\*61.25

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**DOCUMENT # 753588**

1. Corporation Name

**SPRINGLAKE-NORTHWOOD HOMEOWNERS ASSOCIATION, INC**

Principal Place of Business

8280 NW 94 AVENUE  
TAMARAC FL 33321

Mailing Address

8280 NW 94 AVENUE  
TAMARAC FL 33321



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

08/01/1980

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

4. FEI Number

59-1941074

Applied For

Not Applicable

22

27

City & State

City & State

5. Certificate of Status Desired ☐

**\$8.75** Additional  
Fee Required

23

28

Zip

Country

Zip

Country

6. Election Campaign Financing

**\$5.00** May Be  
Added to Fees

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**SCHNEIDER, PHILIP**  
**9700 NW 83RD ST**  
**TAMARAC FL 33321**

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 signature required when reinstating)

DATE

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

P

☐ DELETE

1.1 TITLE

DT

☐ Change

☒ Addition

NAME

LEVY, LEONARD

1.2 NAME

MURNEY, KIM

STREET ADDRESS

8530 NW 95TH AVE

1.3 STREET ADDRESS

9701 NW 83 Street

CITY-ST-ZIP

TAMARAC, FL 0 33321

1.4 CITY-ST-ZIP

Tamarac, FL 33321

TITLE

DT

☒ DELETE

2.1 TITLE

T

☐ Change

☒ Addition

NAME

~~SCHNEIDER, PHILIP~~

2.2 NAME

Gicobbe, Ben

STREET ADDRESS

~~8280 NW 94TH AVE~~

2.3 STREET ADDRESS

9735 N.W. 82 Street

CITY-ST-ZIP

~~TAMARAC, FL 0~~

2.4 CITY-ST-ZIP

Tamarac, FL 33321

TITLE

VPD

☐ DELETE

3.1 TITLE

T

☐ Change

☒ Addition

NAME

STEIN, MURIEL

3.2 NAME

Tristaino, Marilyn

STREET ADDRESS

8220 NW 95TH AVE

3.3 STREET ADDRESS

8235 N.W. 94 Avenue

CITY-ST-ZIP

TAMARAC FL

3.4 CITY-ST-ZIP

Tamarac, FL 33321

TITLE

SA

☐ DELETE

4.1 TITLE

T

☐ Change

☐ Addition

NAME

~~DEVINE, ELLEN~~

4.2 NAME

Klein, Ronald

STREET ADDRESS

~~8245 NW 94TH AVE~~

4.3 STREET ADDRESS

8245 N.W. 95 Avenue

CITY-ST-ZIP

~~TAMARAC FL~~

4.4 CITY-ST-ZIP

Tamarac, FL 33321

TITLE

~~XX~~

☒ DELETE

5.1 TITLE

T

☐ Change

☐ Addition

NAME

~~NORTON, MARK~~

5.2 NAME

Barre, Jenine

STREET ADDRESS

~~8210 NW 95TH AVE~~

5.3 STREET ADDRESS

9703 N.W. 82 Street

CITY-ST-ZIP

~~TAMARAC FL~~

5.4 CITY-ST-ZIP

Tamarac, FL 33321

TITLE

~~SA~~

☒ DELETE

6.1 TITLE

T

☐ Change

☐ Addition

NAME

~~MANOLAKIS, MOLLY~~

6.2 NAME

Cohen, Joseph

STREET ADDRESS

~~8210 NW 95TH AVE~~

6.3 STREET ADDRESS

8255 N.W. 95 Avenue

CITY-ST-ZIP

~~TAMARAC FL~~

6.4 CITY-ST-ZIP

Tamarac, Florida 33321

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (11/98)