


FILE NOW: FILING FEE IS \$61.25

FILED

Feb 26 1998 8:00am  
Secretary of State

|   |   |  |
|---|---|--|
| <b>NONPROFIT CORPORATION ANNUAL REPORT 1998</b> |  | <b>FLORIDA DEPARTMENT OF STATE</b><br><b>Sandra B. Mortham</b><br>Secretary of State<br>DIVISION OF CORPORATIONS |
|---|---|--|

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| <b>DOCUMENT # 754320 (0)</b><br>1. Corporation Name<br><b>COSTA DEL SOL RESORT CONDOMINIUM ASSOCIATION, IN</b> |
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| Principal Place of Business<br><b>4220 EL MAR DR.<br/>LAUDERDALE-BY-THE-SEA FL 33308</b> | Mailing Address<br><b>4220 EL MAR DR.<br/>LAUDERDALE-BY-THE-SEA FL 33308</b> |
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|---|--|
| <b>21</b> 2. Principal Place of Business<br>Suite, Apt. #, etc.<br><b>22</b> City & State<br><b>23</b> Zip<br><b>24</b> Country | <b>26</b> 2a. Mailing Address<br>Suite, Apt. #, etc.<br><b>27</b> City & State<br><b>28</b> Zip<br><b>29</b> Country |
|---|--|

|   |  |
|---|--|
| <b>3.</b> Date Incorporated or Qualified<br><b>09/24/1980</b>   |  |
| <b>4.</b> FEI Number<br><b>59-2231432</b>   | Applied For<br><input type="checkbox"/> Not Applicable |
| <b>5.</b> Certificate of Status Desired <input type="checkbox"/> <b>\$8.75 Additional Fee Required</b>  |  |
| <b>6.</b> Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> <b>\$5.00 May Be Added to Fees</b>   |  |
| <b>7.</b> Is this nonprofit corporation a homeowners association?<br><input type="checkbox"/> Yes <input type="checkbox"/> No                                       |  |
| <b>8.</b> This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No |  |

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| <b>9. Name and Address of Current Registered Agent</b><br><b>BECKER POLIAKOFF &amp; STREITFELD, P.A.</b><br><b>EMERALD LAKE CORP. PARK</b><br><b>3111 STIRLING ROAD</b><br><b>FT. LAUDERDALE FL 33312-6525</b> |
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|---|
| <b>10. Name and Address of New Registered Agent</b><br><b>81</b> Name<br><b>82</b> Street Address (P.O. Box Number is Not Acceptable)<br><b>83</b><br><b>84</b> City <b>FL</b> <b>85</b> Zip Code |
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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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

| 12. OFFICERS AND DIRECTORS   |                                 |
|--|---------------------------------|
| <b>T/D</b><br><b>SORANNO, VITO</b><br><b>14 MOUNT PLEASANT RD.</b><br><b>MORRISTOWN NJ 07960</b>         | <input type="checkbox"/> DELETE |
| <b>VPD</b><br><b>GIRARDIN, OMER P.</b><br><b>8089 HENRI BOURASSA ST.</b><br><b>MONTREAL, CAN H1E 2Z3</b> | <input type="checkbox"/> DELETE |
| <b>D</b><br><b>SIEBENALER, JOHN C.</b><br><b>246 PORTMAN LN</b><br><b>PITTSBURGH PA</b>                  | <input type="checkbox"/> DELETE |
| <b>SD</b><br><b>CABLE, BARBARA</b><br><b>3334 HIDDEN HILLS, S.E.</b><br><b>GRAND RAPIDS MI</b>           | <input type="checkbox"/> DELETE |
| <b>P</b><br><b>MUCKER, ROBERT A.</b><br><b>2113 CREST VIEW COURT</b><br><b>LAFAYETTE IN</b>              | <input type="checkbox"/> DELETE |
| <b>M</b><br><b>DUBE, RENE A.</b><br><b>3930 CRYSTAL LAKE DR., #116</b><br><b>POMPANO BEACH FL 33064</b>  | <input type="checkbox"/> DELETE |

| 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12  |   |
|--|---|
| <b>1.1</b> TITLE<br><b>1.2</b> NAME<br><b>1.3</b> STREET ADDRESS<br><b>1.4</b> CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| <b>2.1</b> TITLE<br><b>2.2</b> NAME<br><b>2.3</b> STREET ADDRESS<br><b>2.4</b> CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| <b>3.1</b> TITLE<br><b>3.2</b> NAME<br><b>3.3</b> STREET ADDRESS<br><b>3.4</b> CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| <b>4.1</b> TITLE<br><b>4.2</b> NAME<br><b>4.3</b> STREET ADDRESS<br><b>4.4</b> CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| <b>5.1</b> TITLE<br><b>5.2</b> NAME<br><b>5.3</b> STREET ADDRESS<br><b>5.4</b> CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |
| <b>6.1</b> TITLE<br><b>6.2</b> NAME<br><b>6.3</b> STREET ADDRESS<br><b>6.4</b> CITY - ST - ZIP | <input type="checkbox"/> Change <input type="checkbox"/> Addition |

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: \_\_\_\_\_ 2/19/98 (954) 776-6900

CR2E037 (10/97)