FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 762974

(4)

GRANADA VILLAGE CONDOMINIUM ASSOCIATION, INC.					
					NGN BIÐU ÞIÐU BIÐU BIÐU IÐÐ
Principal Place	a of Rusinase	Mailing Address			
•				<u> </u>	
1310 AVENUE OF THE STARS 1310 AVENUE OF THE STARS COCONUT CREEK FL 33066 COCONUT CREEK FL 33066				3. Date Incorporated or Qualified	<u></u> -
US		US		04/26/1982	
				4. FEI Number	Applied For
6 5		1 5 11 12 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		59-2059707	Not Applicable
21	ace of Business	2a. Mailing Address 26		5. Certificate of Status Desired	\$8.75 Additional Fee Required
Suite, Apt. #, etc.		Suite, Apt. #, etc.		6. Election Campaign Financing	\$5.00 May Be
City & State		City & State		Trust Fund Contribution	Added to Fees
23		City & State		7. Is this nonprofit corporation a homeowners association?	
Zip	Country	Zip	Country	<u> </u>	
24	25	<u> </u>	30	 This corporation owes or has paid the c Personal Property Tax due June 30. 	Urrent year intangible ☐ Yes ☐ No
24	9. Name and Address of Curre		30	10. Name and Address of New Registere	
<u> </u>			81 Name		
RAVO, PAT T. 1310 AVENUE OF THE STARS			82 Street Addre	ess (P.O. Box Number is Not Acceptable)	
% WYNMOOR COMMUNITY COUNCIL, INC.			83		·
COCONUT CREEK FL 33066			84 City		65 Zip Code
				F	L ' '
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 ag	peni and title if applicable (NOTE	Registered Agent signature require	ed when reinstating) DATE	
12.	OFFICERS AF	ND DIRECTORS	13.	ADDITIONS/CHANGES TO OFFICERS AF	ND DIRECTORS IN 12
TITLE	D	DELETE	1.1 TITLE		Change Addition
NAME	TISHBERG, MURRAY		1.2 NAME		
STREET ADDRESS	2001 D-1 GRANADA DR		1.3 STREET ADDRESS		
CITY-ST-ZIP	COCONUT CREEK FL		1.4 CITY - ST - ZIP		
TITLE	D	DELETE	2.1 TITLE		Change Addition
NAME	FRIEDMAN, HY		2.2 NAME		
STREET ADDRESS	2003 L-1 GRANADA DR		2.3 STREET ADDRESS		
CITY-ST-2IP	COCONUT CREEK FL		2.4 CITY-ST-ZIP		
TITLE	PD	☐ DELETE	3.1 TITLE	·	☐ Change ☐ Addition
NAME	BLOOM, CHARLES		3.2 NAME		
STREET ADDRESS	2006 B-1 GRANADA DR		3.3 STREET ADDRESS		
CITY-ST-ZIP	COCONUT CREEK FL		3.4. CITY-ST-ZIP		
TITLE	D	☐ DELETE	4.1 TITLE		☐ Change ☐ Addition
NAME	SHAREFF, BENJAMIN		4. 2 NAME		
STREET ADDRESS	2204 GRANADA DRIVE APT	K3	4.3 STREET ADDRESS		
CITY-ST-ZIP	COCONUT CREEK FL	There ex	4.4 CiTY-ST-ZiP		0
TITLE	DV	☐ DELETE	5.1 TITLE		Change Addition
NAME	GREENFIELD, ARTHUR		5.2 NAME		
STREET ADDRESS	2002 GRANADA DRIVE APT	Н3	5.3 STREET ADORESS		
CITY-ST-ZIP	COCONUT CREEK FL		5.4 CITY-ST-ZIP		[] A. [] T
TITLE	0	☐ DELETE	6.1 TITLE		Change Addition
NAME	CAPLAN, NATE	. .	6.2 NAME		,
STREET ADDRESS	2005 GRANADA DRIVE APT	D-1	6.3 STREET ADDRESS		

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.

6.4 CITY-ST-ZIP

SIGNATURE: Charlie Bloom

CITY-ST-ZIP

COCONUT CREEK FL

. Bloom

(954) 978-2600

FILED

Apr 21 1998 8:00am

Secretary of State

E037 (10/97)