## ∠ now: filing fee is \$61.25

PROFIT CORPORATION ANNUAL REPORT

SIGNATURE:



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State

**DIVISION OF CORPORATIONS** 

## **FILED** Jun 10, 1999 8:00 am Secretary of State 06-10-1999 90038 001 \*2,695.00

GR	CUMENT # 76297  ANADA VILLAGE CONDOMINIU	( ')	NC.	* 5 74644 574644	- 90038 - 12 *
1	Place of Business	Mailing Address			
1310 AVEN COCONUT US	IUE OF THE STARS CREEK FL 33066	1310 AVENUE OF THE STARS COCONUT CREEK FL 33066 US		3. Date Incorporated or Qualified  04/26/1982  4. FEI Number Applied Fo	
2. Princip	al Place of Business	2a. Mailing Address	<del></del>	59-2059707	Not Applica
Suite A	Apt. #. etc.	26		5. Certificate of Status Desired	\$8.75 Additiona
22 City & 5		Suite, Apt. #, etc.		6. Election Campaign Financing Trust Fund Contribution	\$5.00 May Be
23 ZID		City & State		7. Is this nonprofit corporation a hon	Added to Fees neowners association? Yes No
24	Country 25	Zip <b>29</b>	Country 30	8. This corporation owes or has paid Personal Property Tax due June 3	the current year Intangible
	9. Name and Address of Current	Registered Agent		10. Name and Address of New Regi	O Yes No
RAVO	PAT T.		81 Name		
1310 AVENUE OF THE STARS			82 Street Ac	ddress (P.O. Box Number is Not Acceptable	·)
% WY	NMOOR COMMUNITY COUNCIL. INC	<b>C</b> .	83	<del></del>	·
COCO	NUT CREEK FL 33066		94 0		
11. Pursuar	It to the provisions of Southern C47 0500	· .	84 City		FI 85 Zip Code
office or	registered agent, or both, in the State of	and 617.1508, Florida Statu Florida, Such change was	ites, the above-named co	prporation submits this statement for the puri ation's board of directors. I hereby accept to	pose of changing its registere
-90,4.1	an identified with all accept the obligation				
		oris of, Section 617.0503, F	lorida Statutes.	addit's odard or directors. I hereby accept to	he appointment as registered
SIGNATURE	Signature, typed or printed name of registered agent a	and title if applicable. (NO	ronda Statutes.		The appointment as registered
	Signature, typed or printed name of registered agent a OFFICERS AND I	and little if applicable. (NO	TE Registered Agent signature req	ured when reinstating)	DATE TO THE THE STREET OF THE
SIGNATURE	Signature, Niped or printed name of registered agent a OFFICERS AND D	and title if applicable. (NO	TE Registered Agent signature registration 13.		DATE DATE DATE DATE DATE DATE DATE DATE
SIGNATURE 12.	Signature, Niped or printed name of registered agent a OFFICERS AND D TISHBERG, MURRAY 2001 D-1 GRANADA DR	and little if applicable. (NO	TE Registered Agent signature registration 13.  1.1 TITLE  1.2 NAME	ured when reinstating)	DATE DATE DATE DATE DATE DATE DATE DATE
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CHARLES BLOOM PRESIDENT