

FILE NOW: FILING FEE IS \$61.25

FILED

Feb 17 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Northam Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **767370** (0)

1. Corporation Name

**FOREST PARK SOUTH II CONDOMINIUM ASSOCIATION OF
CORAL SPRINGS, INC.**



Principal Place of Business 8381 ROYAL PALM BLVD PO BOX 8325 CORAL SPRINGS FL 33065 US	Mailing Address 4000 N STATE ROAD 7 STE 301 LAUDERDALE LAKES FL 33319-4863 US
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3. Date Incorporated or Qualified 03/09/1983	3a. Date of Last Report 04/22/1996
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2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24	Country 25
Zip 29	Country 30

4. FEI Number 59-2322469	Applied For ☐ Not Applicable
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5. Certificate of Status Desired ☐	\$8.75 Additional Fee Required
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6. Election Campaign Financing Trust Fund Contribution ☐	\$5.00 May Be Added to Fees
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8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No
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9. Name and Address of Current Registered Agent PMI-DEVON MANAGEMENT CORPORATION 4000 N SR 7, STE 301 LAUDERDALE LAKES FL 33319

10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 85 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 reappointing) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE PD	☐ DELETE	1.1 TITLE V PD	☒ Change ☐ Addition
NAME JOHNSON, SUSAN		1.2 NAME Johnson, Susan	
STREET ADDRESS 5030 NW 5TH AVE		1.3 STREET ADDRESS 5030 NW 5th Avenue	
CITY-ST-ZIP BOCA RATON FL		1.4 CITY-ST-ZIP Boca Raton, FL 33431	
TITLE VPD	☐ DELETE	2.1 TITLE PD	☒ Change ☐ Addition
NAME BOGDEN, RICHARD		2.2 NAME Bogden, Richard	
STREET ADDRESS 8381 ROYAL PALM BLVD.		2.3 STREET ADDRESS 8381 Royal Palm Blvd.	
CITY-ST-ZIP CORAL SPRINGS FL		2.4 CITY-ST-ZIP Coral Springs, FL 33065	
TITLE TSD	☒ DELETE	3.1 TITLE Spectator, Eric A.	☐ Change ☒ Addition
NAME BLITSTEIN, WENDY		3.2 NAME Spectator, Eric A.	
STREET ADDRESS 8325 ROYAL PALM BLVD		3.3 STREET ADDRESS 8325 Royal Palm Blvd.	
CITY-ST-ZIP CORAL SPRINGS FL		3.4 CITY-ST-ZIP Coral Springs, FL 33065	
TITLE	☐ DELETE	4.1 TITLE TD	☐ Change ☒ Addition
NAME		4.2 NAME Spectator, Eric A.	
STREET ADDRESS		4.3 STREET ADDRESS 8383 Royal Palm Blvd.	
CITY-ST-ZIP		4.4 CITY-ST-ZIP Coral Springs, FL 33065	
TITLE	☐ DELETE	5.1 TITLE VPD	☐ Change ☒ Addition
NAME		5.2 NAME Tramontano, Jerry	
STREET ADDRESS		5.3 STREET ADDRESS 8355 Royal Palm Blvd.	
CITY-ST-ZIP		5.4 CITY-ST-ZIP Coral Springs, FL 33065	
TITLE	☐ DELETE	6.1 TITLE SD	☐ Change ☒ Addition
NAME		6.2 NAME Dames, Beverly	
STREET ADDRESS		6.3 STREET ADDRESS 8343 Royal Palm Blvd.	
CITY-ST-ZIP		6.4 CITY-ST-ZIP Coral Springs, FL 33065	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in 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: *Richard Bogden* **2/10/97**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (9/96)