FILE NOW: FILING FEE IS \$61.25

FILED Apr 21 1998 8:00am NONPROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham Secretary of State ANNUAL REPORT Secretary of State DIVISION OF CORPORATIONS 1998 POCUMENT # (4)769659 LUCAYA VILLAGE II CONDOMINIUM ASSOCIATION. INC. Principal Place of Business Mailing Address 1910 AVENUE OF THE STARS 1310 AVENUE OF THE STARS 3. Date Incorporated or Qualified COCONUT CREEK FL 33066 COCONUTCREEK, F 33066 08/02/1983 4. FEI Number Applied For 59-2031326 Not Applicable 2. Principal Place of Business 20. Mailing Address \$8.75 Additional 5. Certificate of Status Desired 21 26 Fee Required Suite, Apt. #. etc. Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be Added to Fees Trust Fund Contribution 22 27 City & State City & State 7. Is this nonprofit corporation a homeowners association? Yes No 23 28 Zip Country Country 8. This corporation owes or has paid the current year Intangible Yes 24 25 29 30 Personal Property Tax due June 30. 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name RAVO, PAT T. Street Address (P.O. Box Number is Not Acceptable) 82 1310 AVENUE OF THE STARS 83 % WYNMOOR COMMUNITY COUNCIL, INC. COCONUT CREEK FL 33066 City 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) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. 13. OFFICERS AND DIRECTORS DELETE BITLE 1.1 TITLE ☐ Change ☐ Addition NAME COHEN. LENA 1.2 NAME CRZE037 2103 LUCAYA BEND APT C3 1.3 STREET ADDRESS STREET ADDRESS COCONUT CREEK FL 1.4 CiTY-ST-ZIP CITY-ST-ZIP DELETE Change Addition 2.1 TITLE TITLE KASOW, BEN 2 2 NAME NAME STREET ADDRESS 2202 M1 LUCAYA BEND 2.3 STREET ADDRESS CITY-ST-ZIP COCONUT CREEK FL 2.4 CITY-ST-ZIP DELETE Change Addition TITLE 3.1 TITLE FISHER, HARRY 32 NAME NAME 2101 N3 LUCAYA BEND 3.3 STREET ADDRESS STREET ADDRESS COCONUT CREEK FL 3.4. CITY-ST-ZIP CITY-ST-ZIP DELETE Addition Change TITLE 4.1 TITLE YAGER, RENEE NAME 4 2 NAME 2102 LUCAYA BEND 4.3 STREET ADDRESS STREET ADDRESS COCONUT CREEK FL 4.4 CITY-ST-ZIP CITY-ST-ZIP DELETE 5.1 TITLE Change Addition TITLE PANETZ, SAMUEL 5.2 NAME NAME STREET ADDRESS 2201 K2 LUCAYA BEND 5.3 STREET ADDRESS COCONUT CREEK FL CITY-ST-ZIP 5.4 CITY-ST-ZIP

Samuel Panetz 1/14/48 (454) 978-2600 SIGNATURE:

6.1 TITLE

6.2 NAM

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP 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 of the receiver or trustee empowered to execute his report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, goon an attachment with an agrices.

Change

___ Addition

DELETE

TITLE

NAME

STREET ADDRESS

PORTER, BEN

2201 02 LUCAYA BEND

COCONUT CREEK FL