

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 22, 1999 8:00 am  
Secretary of State

04-22-1999 90028 016 \*\*\*\*61.25

DOCUMENT # 770181

1. Corporation Name

GINGER TREE HOMEOWNERS' ASSOCIATION, INC.

Principal Place of Business

% SUNRAE MANAGEMENT  
4000 N SR 7, 408 A  
LAUDERDALE LAKES FL 33319  
US

Mailing Address

% SUNRAE MANAGEMENT  
4000 N SR 7, 408A  
LAUDERDALE LAKES FL 33319  
US



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

09/09/1983

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

4. FEI Number  
59-2376818

Applied For  
Not Applicable

23 City & State

27 City & State

5. Certificate of Status Desired ☐

\$8.75 Additional  
Fee Required

24 Zip Country

28 Zip Country

6. Election Campaign Financing  
Trust Fund Contribution ☐

\$5.00 May Be  
Added to Fees

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

BUSCH, KAREN H  
C/O SUNRAE MANAGEMENT SERVICES  
4000 N STATE RD 7 #408A  
LAUDERDALE LAKES FL 33319

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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)

DATE

12.

OFFICERS AND DIRECTORS

13.

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE PT  
NAME DILLMAN, ERWIN  
STREET ADDRESS 3294 CARAMBOLA CIR S  
CITY-ST-ZIP COCONUT CREEK FL

☐ DELETE

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE D  
NAME BUND, SOL  
STREET ADDRESS 3312 CARAMBOLA CIR S  
CITY-ST-ZIP COCONUT CREEK FL

☐ DELETE

2.1 TITLE  
2.2 NAME  
2.3 STREET ADDRESS  
2.4 CITY-ST-ZIP

☒ Change ☐ Addition

VICE PRESIDENT

TITLE SD  
NAME MANTELL, LARRY  
STREET ADDRESS 3258 CARAMBOLA CIRCLE SOUTH  
CITY-ST-ZIP COCONUT CREEK FL

☐ DELETE

3.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

☒ Change ☐ Addition

DIRECTOR ONLY

TITLE VP  
NAME FENN, MARVIN  
STREET ADDRESS 3346 CARAMBOLA CR S  
CITY-ST-ZIP COCONUT CREEK FL

☐ DELETE

4.1 TITLE  
4.2 NAME  
4.3 STREET ADDRESS  
4.4 CITY-ST-ZIP

☒ Change ☐ Addition

DIRECTOR

TITLE D  
NAME RIANART, GARY  
STREET ADDRESS 3256 CARAMBOLA CIRCLE SOUTH  
CITY-ST-ZIP COCONUT CREEK FL

☒ DELETE

5.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

TITLE REINFELD, HOPE  
NAME 3260 Carambola Circle So.  
STREET ADDRESS COCONUT CREEK, FL  
CITY-ST-ZIP

☐ DELETE

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

☐ Change ☒ Addition

SECRETARY

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, with all other like empowered.

SIGNATURE:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

4/16/99

Daytime Phone #

CR2E037 (11/98)