NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N01621

1. Corporation Name

MONTEGO BAY HOMEOWNERS ASSOCIATION, INC. OF DADE COUNTY

Princi	pal l	Plac	e of	Bus	ines
9780	SW	216	ST		
MIAM	II FL	331	90		

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

22

Mailing Address

9780 SW 216 ST MIAMI FL 33190

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

27

FILED May 05, 1999 8:00 am § Secretary of State

05-05-1999 90089 021 ****61.25



3. Date Incorporated or Qualifed

02/15/1984

59-2774543

4 FEI Number

23		28				5. Certificate of Status E	resiled []	Fee Rec	quired				
Zip	Country	Zip		Country		6. Election Campaign Fi	inancing	\$5.00	May Be				
24	25	29	30			Trust Fund Contributi	ion	Added to	Fees				
Name and Address of Current Registered Agent					10. Name and Address of New Registered Agent								
				81		Paige, Robert E.		a					
PAIGE, ROBERT 2151 LEJUNE ROAD				82	Street	Address (P.O. Box Number is No 11440 North Kenda	ot Acceptable)						
SUITE 309-A				83		Penthouse 400							
CORAL GABLES FL 33134			84	Cit.	LEMINANTE AND		. 85 Zip C	ode					
(Miami	F	L 331					
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 or registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE													
12.		S AND DIRECTORS		13.		ADDITIONS/CHANGE	S TO OFFICERS	AND DIRECTOR	RS IN 12				
TITLE	D.****		DELETE	1.1 TITLE		VPD		Change	Addition				
NAME	REYES, EDWARD			1.2 NAME		Bodenmiller, Rober	+						
STREET ADDRESS	9985 SW 218 TERR			1.3 STREET	ADDRESS	Bodenmiller, Rober 9780 SW 216 Stree	. †						
CITY-ST-ZIP	MIAMI FL 33190			1.4 CITY-ST		Miami, Fl 33190			/				
TTLE	D		DELETE	2.1 TITLE	-	VPD		🗔 Change	Addition				
NAME	BAGLIN, DAVID			2.2 NAME		Arendas, Albert							
STREET ADDRESS	21818 SW 98 PL		1	2.3 STREET	ADDRESS	9780 SW 216 Street	+						
CITY-ST-ZIP	MIAMI FL 33190			2. 4 CITY-S	T-ZIP	MIAMI, Fl 33190							
TITLE	SD	5	DELETE	3.1 TITLE		SD		☐ Change	▼ Addition				
NAME	HARTLEY, PHIL		I	3.2 NAME		Voelz, Thomas							
STREET ADDRESS	21694 SW 98 PL		l l	3.3 STREET	ADDRESS	9780'SW 216 Street	}						
CITY-ST-ZIP	MIAMI FL			3.4. CITY-S	T- ZIP	Miami, Fl 33190							
TITLE	TD	•	DELETE	4.1 TITLE		TD ´		Change	Addition				
NAME	FLEMING, NELL		•	4, 2 NAME		Viener, Fred	L						
STREET ADDRESS	21817 SW 98 PL			4.3 STREET	ADDRESS	9780 SW 216 Stree	`						
CITY-ST-ZIP	MIAMI FL 33190			4.4 CITY- ST	T- ZIP	Miami, Fl 33190							
TITLE		{		5.1 TITLE		PD		Change Change	Addition				
NAME	•			5.2 NAME		Baglin, David							
STREET ADDRESS				5.3 STREET		9780 SW 216 Stree	٢						
CITY-ST-ZIP				5.4 CITY-S	T- ZIP	Miami, Fl 33190			F-9 A 1 (10)				
TITLE				6.1 TITLE				☐ Change	Addition				
NAME				6.2 NAME									
STREET ADDRESS				6.3 STREET	ADDRESS								
CITY-ST-ZIP				6.4 CITY-S	T-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 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 REQUIRE
SIGNATURE AND TYPED OF PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

04/26/99

305-251-7540.

Daytime Phone #

CR2E037 (11/98)

Applied For

✓ Not Applicable

\$8.75 Additional