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Mar 06 1997 8:00am
Secretary of State

NONPROFIT CORPORATION
ANNUAL REPORT
1997



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N10639 (5)

1. Corporation Name

CARMEL AT THE CALIFORNIA CLUB CONDOMINIUM "20" ASSOCIATION, INC.



Principal Place of Business

Mailing Address

% DCI
2901 SIMMS ST
HOLLYWOOD FL 33020
US

% DCI
2901 SIMMS ST
HOLLYWOOD FL 33020-1510
US

3. Date Incorporated or Qualified
08/12/1985

3a. Date of Last Report
03/27/1996

2. Principal Place of Business

2a. Mailing Address

4. FEI Number
59-2564868

Applied For
Not Applicable

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

5. Certificate of Status Desired

\$8.75 Additional Fee Required

22 City & State

27 City & State

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

23 Zip

Country

28 Zip

Country

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

24

25

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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MEYROWITZ, ANDREW
% DCI
2901 SIMMS ST
HOLLYWOOD FL 33020

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 617.0507 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

Brenda Fernandez
Signature: Typed or printed name of registered agent and title if applicable.

Haydee Morales
(NPT) Registered Agent signature required when reinstating

3/2/97
DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

1.1 TITLE President Change Addition
1.2 NAME CHARLES ARTINIAN
1.3 STREET ADDRESS 907 NE 199 ST. #101
1.4 CITY-ST-ZIP MIAMI FL, 33179

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

2.1 TITLE VICE PRESIDENT Change Addition
2.2 NAME HAYDEE MORALES
2.3 STREET ADDRESS 907 NE 199 ST.
2.4 CITY-ST-ZIP MIAMI FL, 33179

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

3.1 TITLE VICE PRESIDENT Change Addition
3.2 NAME BRENDA FERNANDEZ
3.3 STREET ADDRESS 196 NE 10TH AVE.
3.4 CITY-ST-ZIP MIAMI FL, 33179

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

TITLE DELETE
NAME
STREET ADDRESS
CITY-ST-ZIP

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

14. I do 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.

SIGNATURE: *Charles Artinian* CHARLES ARTINIAN 1/27/97 653-4730
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0021254

CP2E037 (9/96)