FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

N10756

(7)

CONDOMINIUM "F" ASSOCIATION AT MEDITERRANEA, INC.

							1 ARBOLLON ON LINES MOULD INVESTIGATION OF THE BUILDING OF		.		
Principal Pla	ce of Business	Mailing Address				7			is eighi sebel (se)		
343-9 IVES DAIRY ROAD NORTH MIAMI BEACH FL 33179		343-9 IVES DAIRY ROAD				3.	Date Incorporated or Qualified			—	
		NORTH MIAMI BEACH FL 33179				08/20/1985					
						4.	FEI Number		Applied For		
						1	59-2579854		Not Applicat	ole	
2. Principal Place of Business		2a. Mailing Address				<u> </u>		\$8.7	5 Additional		
21		26				3.	Certificate of Status Desired		Required		
Suite, Apt. #, etc.		Suite, Apt. #, etc.				6.	Election Campaign Financing	\$5.0	0 May Be	_	
22		27					Trust Fund Contribution		d to Fees		
City & State		City & State				7. Is this nonprofit corporation a homeowners association?					
23		28					Yes	☐ No			
Zlp	Country	Zip	Cou	intry		8.	This corporation owes or has paid the c	urrent year	· Intangible		
24	25	29	30	,			Personal Property Tax due June 30.	Yes Yes	□ No		
Name and Address of Current Registered Agent						10.	Name and Address of New Registered	J Agent			
				81	Name						
MITCHELL, JOEL BETH				82	Street Addre	dress (P.Q. Box Number Is Not Acceptable)					
343-9 IVES DAIRY ROAD						`					
NORTH MIAMI BEACH FL 33179				83							
				84	City			051.7	ip Code		
					•		FI		•		
11. Pursuant	to the provisions of Sections 617.05	02 and 617.1508, Florida Statu	ites, the al	bove-	named corp	oration	n submits this statement for the purpose poard of directors. I hereby accept the ap	of changin	g its registere	d	
agent. I a	egistered agent, or both, in the Stat im familiar with, and accept the oblig	le of Florida. Such change was gations of, Section 617,0503, F	authorizeo Iorida Stat	d by ti :utes.	he corporati	on's b	poard of directors. I hereby accept the ap	pointment	as registered		
SIGNATURE	,	,					•				
	Signature, typed or printed name of registered as		TE: Registered	d Agent	signature require	d when	reinstating) DATE			-	
12.		ND DIRECTORS	13.			Þ	ADDITIONS/CHANGES TO OFFICERS AN	D DIRECT	ORS IN 12		
TITLE	D	DELETE	1.1 TI	TLE				Chang	ge 🔲 Additio	חנ	
NAME	COLEMAN, BARBARA		1.2 NA	AME							
STREET ADDRESS 341-01 IVES DAIRY RD			1,3 STREET ADDRESS		DRESS						
CITY-ST-ZIP			1.4 CI	DITY-ST-ZIP							
TITLE	TD	☐ DELETE	2.1 TiT	2.1 TITLE				Chang	ge 🔲 Additio	חכ	
NAME	MITCHELL, JOEL B		2.2 NA	ME						ĺ	
STREET ADDRESS 343-9 IVES DAIRY RD			2.3 STREET ADDRESS		DORESS						
CITY-ST-ZIP	MIAMI FL		2. 4 CI	TY-\$T-	ZIP						
TITLE	SD	DELETE	31 TIT	(LE				Chang	ne Additio	'n	

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 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 chapter 6, or on an attachment with an address.

3.2 NAME

4.1 TITLE

4. 2 NAME

5.1 TITLE

5.2 NAME

6.1 TITLE

6.2 NAME

DELETE

DELETE

__ DELETE

3.3 STREET ADDRESS

4.3 STREET ADDRESS

5.3 STREET ADDRESS

6.3 STREET ADDRESS

5.4 CITY - ST-ZIP

4.4 CITY-ST-ZIP

3.4, CITY-ST-ZIP

SIGNATURE:

NAME

TITLE

NAME

TITLE

NAME

TITLE

NAME

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

CITY-ST-ZIP

PARIS, JACK

MIAMI FL

MIAMI FL

341-4 IVES DAIRY RD

MORALES, PETER

341-6 IVES DAIRY RD

4000 BUTTHHUSED be BYHMickel 1/15/98 (30)933-364

CR2E037 (10/97)

Change

Change

Addition

Addition

FILED

Feb 02 1998 8:00am

Secretary of State