


FILE NOW: FILING FEE IS \$61.25

FILED
Mar 24 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		 FLORIDA DEPARTMENT OF STATE Sandra B. Bartham Secretary of State DIVISION OF CORPORATIONS													
DOCUMENT # 1. Corporation Name N11837															
Ivanhoe West at C.V. Condo I Assoc Inc.															
Principal Place of Business Prime Management Group 9728 Pines Blvd PEmbroke Pines, FL 33024		Mailing Address (Same as Principal Place of Business)													
2. Principal Place of Business 21 Prime Management Group Suite, Apt. #, etc. 9728 Pines Blvd City & State Pembroke Pines, FL Zip 33024		2a. Mailing Address 26 SAME Suite, Apt. #, etc. City & State Zip 33024													
22 9728 Pines Blvd City & State Pembroke Pines, FL Zip 33024		27 City & State Zip 33024													
23 Pembroke Pines, FL Zip 33024		28 City & State Zip 33024													
24 33024		25 Broward													
9. Name and Address of Current Registered Agent Steve Schnitzer Prime Management Group 9728 Pines Blvd Pembroke Pines, FL 33024		10. Name and Address of New Registered Agent 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: <i>[Signature]</i> (NOTE: Registered Agent signature required when reinstating) DATE: 2/28/97															
12. OFFICERS AND DIRECTORS															
<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 50%;"> TITLE PRESIDENT <input type="checkbox"/> DELETE NAME Al Nadler STREET ADDRESS 1251 SW 134 Way A110 CITY - ST - ZIP Pembroke Pines, FL 33027 </td> <td style="width: 50%;"> 11. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 12. NAME 13. STREET ADDRESS 14. CITY - ST - ZIP </td> </tr> <tr> <td> TITLE DIRECTOR <input type="checkbox"/> DELETE NAME Marcel Michaud STREET ADDRESS 1301 SW 134 Way B209 CITY - ST - ZIP Pembroke Pines, FL 33027 </td> <td> 21. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 22. NAME 23. STREET ADDRESS 24. CITY - ST - ZIP </td> </tr> <tr> <td> TITLE DIRECTOR <input type="checkbox"/> DELETE NAME Bea Kaskowitz STREET ADDRESS 144 SW 134 Way C113 CITY - ST - ZIP Pembroke Pines, FL 33027 </td> <td> 31. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 32. NAME 33. STREET ADDRESS 34. CITY - ST - ZIP </td> </tr> <tr> <td> TITLE Vice President <input type="checkbox"/> DELETE NAME Arthur Bennett STREET ADDRESS 1401 SW 135 Terr H407 CITY - ST - ZIP Pembroke Pines, FL 33027 </td> <td> 41. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 42. NAME 43. STREET ADDRESS 44. CITY - ST - ZIP </td> </tr> <tr> <td> TITLE DIRECTOR <input type="checkbox"/> DELETE NAME Bernie Kutikoff STREET ADDRESS 1301 SW 135 Terr J307 CITY - ST - ZIP Pembroke Pines, FL 33027 </td> <td> 51. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 52. NAME 53. STREET ADDRESS 54. CITY - ST - ZIP </td> </tr> <tr> <td> TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY - ST - ZIP </td> <td> 61. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 62. NAME 63. STREET ADDRESS 64. CITY - ST - ZIP </td> </tr> </table>				TITLE PRESIDENT <input type="checkbox"/> DELETE NAME Al Nadler STREET ADDRESS 1251 SW 134 Way A110 CITY - ST - ZIP Pembroke Pines, FL 33027	11. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 12. NAME 13. STREET ADDRESS 14. CITY - ST - ZIP	TITLE DIRECTOR <input type="checkbox"/> DELETE NAME Marcel Michaud STREET ADDRESS 1301 SW 134 Way B209 CITY - ST - ZIP Pembroke Pines, FL 33027	21. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 22. NAME 23. STREET ADDRESS 24. CITY - ST - ZIP	TITLE DIRECTOR <input type="checkbox"/> DELETE NAME Bea Kaskowitz STREET ADDRESS 144 SW 134 Way C113 CITY - ST - ZIP Pembroke Pines, FL 33027	31. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 32. NAME 33. STREET ADDRESS 34. CITY - ST - ZIP	TITLE Vice President <input type="checkbox"/> DELETE NAME Arthur Bennett STREET ADDRESS 1401 SW 135 Terr H407 CITY - ST - ZIP Pembroke Pines, FL 33027	41. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 42. NAME 43. STREET ADDRESS 44. CITY - ST - ZIP	TITLE DIRECTOR <input type="checkbox"/> DELETE NAME Bernie Kutikoff STREET ADDRESS 1301 SW 135 Terr J307 CITY - ST - ZIP Pembroke Pines, FL 33027	51. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 52. NAME 53. STREET ADDRESS 54. CITY - ST - ZIP	TITLE <input type="checkbox"/> DELETE NAME STREET ADDRESS CITY - ST - ZIP	61. TITLE <input type="checkbox"/> Change <input type="checkbox"/> Addition 62. NAME 63. STREET ADDRESS 64. CITY - ST - ZIP
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13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 600002122066 -03/24/97--01132--028 ***61.25															
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: <i>[Signature]</i> 2/14/97 3-24 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR															

CR2E037 (9/96)