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NONPROFIT Jun 25 1998 8:00am FLORIDA DEPARTMENT OF STATE CORPORATION Sandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State DIVISION OF CORPORATIONS 1998 DOCUMENT # N17756 (0)SEVEN ISLES SECURITY FUND. INC. Principal Place of Business Mailing Address ONE SEVEN ISLES DRIVE ONE SEVEN ISLES DRIVE 3. Date incorporated or Qualified FT. LAUDERDALE FL 33301-1590 FT. LAUDERDALE FL 33301-1590 <u>11/13/1986</u> 4. FEI Number Applied For 65-0000432 Not Applicable 2. Principal Place of Business 2a. Mailing Address \$8.75 Additional 5. Certificate of Status Desired 21 26 Fee Required Suite, Apt. #, etc. Suite, Apt. #, etc. 6. Election Campaign Financing \$5.00 May Be 22 27 Trust Fund Contribution Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? 23 28 **Z**Yes □ No Ζŧρ Country Zip Country 8. This corporation owes or has paid the current year Intangible 24 25 29 30 Personal Property Tax due June 30. ☐ Yes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent Name 81 ADLER, RUSSELL S Street Address (P.O. Box Number is Not Acceptable) 750 SE 3RD AVE SUITE 200 83 FT. LAUDERDALE FL 33316 Zip Code 11. Pursuant to the provisions of Sections 617.056 Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered Florida Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered ions of Section 617.0503, Florida Statutes. office or registered agent, or both, in the State of Floringent. I am familiar with, and accept the obligations of SIGNATURE Signature, typed or printed name of egistered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS 13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ DELETË TITLE 11 TITLE Change Addition ADLER, RUSSELL S NAME 1.2 NAME 750 SE 3RD AVE STE 200 STREET ADDRESS 1.3 STREET ADDRESS FT. LAUDERDALE FL CITY-ST-ZIP 1.4 CITY-ST-ZIP TITLE DELETE 2.1 TITLE Change Addition MANWARING, DAVID NAME 2.2 NAME 2400 SEA ISLAND DR STREET ADDRESS 2.3 STREET ADDRESS FT. LAUDERDALE FL CITY-ST-ZIP 2. 4 CITY-ST-ZIP DELETE ☐ Change TITLE 3.1 TITLE Addition HESS, DIANE NAME 3.2 NAME STREET ADDRESS 2524 CASTILLA ISLE 3.3 STREET ADDRESS FT. LAUDERDALE FL CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE TITLE 4.1 TITLE ☐ Change Addition WHITSON, JEAN NAME 4. 2 NAME 2518 BARCEDONA DR STREET ADDRESS 4.3 STREET ADDRESS FT. LAUDERDALE FL CITY-ST-ZIP 4.4 CITY-ST-ZIP TITLE DELETĒ 5.1 TITLE Change Addition NAME 52 NAME STREET ADDRESS 5.3 STREET ADDRESS CITY-ST-ZIP 5.4 CITY-ST-ZIP DELETE Change TITLE 6.1 TITLE Addition NAME 6.2 NAME STREET ADDRESS **6.3 STREET ADDRESS** CITY-ST-ZIP 6.4 CITY-ST-ZIP 14. Thereby 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 certify that I am an officer or director of the corporation or the receiver or trustee appowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in

CUSSOL S. ADLOR, PRO.

**FILED**