

FILE NOW: FILING FEE IS \$61.25

FILED  
Mar 06, 1999 8:00 am  
Secretary of State

03-06-1999 90121 023 \*\*\*\*61.25

0026926

NONPROFIT CORPORATION ANNUAL REPORT 1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N21577

1. Corporation Name

APPLEWOOD VILLAGE IV CONDOMINIUM ASSOCIATION, IN C.

Principal Place of Business

1280 SW 36 AVE., #301  
POMPANO BCH. FL 33069

Mailing Address

1280 SW 36 AVE., #301  
POMPANO BCH. FL 33069



2. Principal Place of Business

2a. Mailing Address

3. Date Incorporated or Qualified

07/15/1987

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

4. FEI Number  
65-0035400

Applied For  
Not Applicable

22 City & State

27 City & State

5. Certificate of Status Desired

\$8.75 Additional Fee Required

23 Zip Country

28 Zip Country

6. Election Campaign Financing Trust Fund Contribution

\$5.00 May Be Added to Fees

24 25

29 30

9. Name and Address of Current Registered Agent

BENNETT, GERALD  
1280 SW 36 AVE., #301  
POMPANO BCH. FL 33069

10. Name and Address of New Registered Agent

81 Name ELEANOR PRESS  
82 Street Address (P.O. Box Number is Not Acceptable) 1280 SW 36 AVE #301  
83 POMPANO BEACH  
84 City FL 85 Zip Code 33069

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

*Eleanor Press*

2-22-99

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D  DELETE  
NAME BROOK, LOUIS  
STREET ADDRESS 1280 SW 36 AVE., #301  
CITY-ST-ZIP POMPANO BCH. FL 33069

1.1 TITLE  Change  Addition  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP

TITLE VP  DELETE  
NAME PRESS, ELEANOR  
STREET ADDRESS 1280 SW 36 AVE #301  
CITY-ST-ZIP POMPANO BCH. FL 33069

2.1 TITLE PRESIDENT  Change  Addition  
2.2 NAME PRESS, ELEANOR  
2.3 STREET ADDRESS 1280 SW 36 AVE #301  
2.4 CITY-ST-ZIP POMPANO BEACH, FL

TITLE S  DELETE  
NAME SORKIN, PEARL  
STREET ADDRESS 1280 SW 36 AVE., #301  
CITY-ST-ZIP POMPANO BCH. FL 33069

3.1 TITLE  Change  Addition  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP

TITLE T/FIRST V.P.  DELETE  
NAME SCHOENFELD, JULIE  
STREET ADDRESS 1280 SW 36 AVE., #301  
CITY-ST-ZIP POMPANO BCH. FL 33069

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

TITLE D  DELETE  
NAME ALTMAN, FRED  
STREET ADDRESS 1280 SW 36 AVE., #301  
CITY-ST-ZIP POMPANO BCH. FL 33069

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

TITLE P  DELETE  
NAME BENNETT, GERALD  
STREET ADDRESS 1280 SW 36 AVE., #301  
CITY-ST-ZIP POMPANO BCH. FL 33069

6.1 TITLE SECOND VICE PRESIDENT  Change  Addition  
6.2 NAME ZEBITZ, ETHEL  
6.3 STREET ADDRESS 1280 SW 36 AVE #301  
6.4 CITY-ST-ZIP POMPANO BEACH, FL

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 REQUIRED

*Eleanor Press* 2-22-99

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (1/198)