

**SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 9, 1995.
AMOUNT DUE ON OR BEFORE 8/9/95: \$155 (IF DISSOLVED, MINIMUM AMOUNT DUE TO REINSTATE: \$395)**

NONPROFIT CORPORATION ANNUAL REPORT 1995



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

FILED
95 JUL 28 PM 1:07
SECRETARY OF STATE
TALLAHASSEE FLORIDA

DOCUMENT # **N24061** (6)
1. Corporation Name
CORPORATE PARK AT EMERALD LAKE ASSOCIATION, INC.

Principal Place of Business Mailing Address
31111 STIRLING ROAD FT. LAUDERDALE FL 33312 31111 STIRLING ROAD FT. LAUDERDALE FL 33312

DO NOT WRITE IN THIS SPACE
3. Date incorporated or Qualified 12/23/1987 3a. Date of Last Report 04/29/1994
4. FEI Number NOT APPLICABLE Applied For Not Applicable
5. Certificate of Status Desired \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status **FILING FEE IS \$61.25**
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip Country 28 Zip Country
24 25 29 30

9. Name and Address of Current Registered Agent
BREIT, RICHARD H.
C/O BECKER & POLIAKOFF, P.A.
3111 STIRLING ROAD
FT. LAUDERDALE FL 33312-6525

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 _____ DATE _____
Signature, typed or printed name of registered agent, and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS
TITLE NAME STREET ADDRESS CITY - ST - ZIP
PTD POLIAKOFF, GARY A. 3111 STIRLING ROAD FT. LAUDERDALE FL 33312
VD PAUL, STANFORD A. 3111 STIRLING ROAD FT. LAUDERDALE FL 33312
D WARNER, GEOFFREY 2555 GLADES ROAD BOCA RATON FL 33431
D BECKER, ALAN S 3111 STIRLING RD. FT. LAUDERDALE FL 33312

13. ADDITIONS CHANGES TO OFFICERS AND DIRECTORS IN 12
11 TITLE Change Addition
12 NAME
13 STREET ADDRESS
14 CITY - ST - ZIP
21 TITLE Change Addition
22 NAME
23 STREET ADDRESS
24 CITY - ST - ZIP
31 TITLE Change Addition
32 NAME Hollander, Walter
33 STREET ADDRESS 3109 Stirling Road
34 CITY - ST - ZIP Ft. Lauderdale, FL 33312
41 TITLE Change Addition
42 NAME
43 STREET ADDRESS
44 CITY - ST - ZIP
51 TITLE Change Addition
52 NAME Berman, Steven
53 STREET ADDRESS 3990 Sheridan Street, Ste 209
54 CITY - ST - ZIP Hollywood, FL 33021
61 TITLE Change Addition
62 NAME Batievsky, Abraham
63 STREET ADDRESS 3990 Sheridan Street, Ste 209
64 CITY - ST - ZIP Hollywood, FL 33021

14. I do hereby certify that the information furnished with this filing is accurately furnished and does not qualify for the exemption stated in Section 110.07(3)(4), 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 or in the signature or on the appointment with an address.

SIGNATURE: _____ DATE: 7/24/95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (3/95)