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NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

N25721

(4)

CROSS CREEK II PATIO HOME OWNERS ASSOCIATION, IN C.

Principal Place of Business Mailing Address C/O D.C.I. INC C/O D.C.I. INC. 2901 SIMMS STREET 2901 SHMMS STREET HOLLYWOOD FL 33020 HOLLYWOOD FL 33020-1510 3a. Date of Last Repo 04/26/1996 3. Date Incorporated or Qualified 04/04/1988 2. Principal Place of Business 2a. Mailing Address 4. FEI Numbe Applied For 65-0055067 26 Not Applicable Suite, Apt #, etc Suite, Apt. #, etc \$8.75 Additional 5. Certificate of Status Desired 22 27 Fee Required City & State City & State 6. Election Campaign Financing \$5.00 May Be 23 28 Trust Fund Contribution Added to Fees Zip Country Country Zip 8. This corporation has liability for intangible tax under s. 199.032, Yes No 24 25 29 30 Florida Statutes 9. Name and Address of Current Registered Agent 10. Name and Address of New Registered Agent 81 Name DEVELOPMENT CONSULTANTS INC. 82 Street Address (P.O. Box Number is Not Acceptable) 2901 SIMMS STREET ATTN: ANDREW MEYROWITZ 83 HOLLYWOOD FL 33020 84 Zip Code 85 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 Signature, typen or preced name of registered agent and little if applicable (NOTE: Registered Agent signature required when reinstating) 12. OFFICERS AND DIRECTORS ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 13. DELETE 11116 DT 1.1 TITLE Change ☐ Addition WHITTINGHAM, WILFRED NAME 1.2 NAME 1856 NW 97TH AVENUE STREET ADDRESS 1.3 STREET ADDRESS PLANTATION FL CITY-ST-7(P 1.4 CITY-ST-ZIP DELETE THILE 21 TITLE ☐ Change Addition STROMBERG, MARY JANE 2.2 NAME 1875 NW 99TH AVENUE STREET ADDRESS 23 STREET ADDRESS PLANTATION FL CHY-ST-ZIP 2 4 CITY-ST-ZIP DELETE Tille 31 TITLE Change Addition NAME CHEN, BEN 32 NAME 1854 NW 97TH AVE STREET ADDRESS. 3.3 STREET ADDRESS **PLANTATION FL** CPTY - ST - ZIP 3.4. CITY-ST-ZIP DELETE TITLE PD 4.1 TITLE Change Addition WENER, IRWIN NAME 4. 2 NAME 1863 NW 99TH AVENUE STREET ADDRESS 4.3 STREET ADDRESS PLANTATION FL CITY-ST-ZIP 4.4 City - St - ZiP DELETE THEE 5.1 TITLE Change X Addition 5.2 NAME JAY SCHROLD STREET ADDRESS 5.3 STREET ADDRESS 9801 N.W. 18th CT. CHY-S1-209 5.4 CITY - ST - ZIP PLANTATION, FL. 33322 TITLE ___ DELETE 6.1 TITLE Change Addition NAME 6.2 NAME STREET ADDRESS 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP CITY - ST - ZIP

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 charged, or on an attachment with an address.

SIGNATURE:

SIGNATURE

GER OR DIRECTOR

3- 19-97

Daytime Phone # 0021271

(96/6)

FILED

Mar 24 1997 8:00am

Secretary of State