


FILE NOW: FILING FEE IS \$61.25

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Apr 21 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # N27827 (7)  
1. Corporation Name  
THE LANDMARK CLUB CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business: 20185 EAST COUNTRY CLUB DR. N. MIAMI BEACH FL 33180  
Mailing Address: 20185 EAST COUNTRY CLUB DR. N. MIAMI BEACH FL 33180-3048

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

3. Date Incorporated or Qualified: 08/10/1988  
3a. Date of Last Report: 02/05/1996  
4. FEI Number: 65-0132882  
5. Certificate of Status Desired:  \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution:  \$5.00 May Be Added to Fees  
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes:  Yes  No

9. Name and Address of Current Registered Agent  
LEVY, MARCUS E  
20185 E. COUNTRY CLUB DR  
#2106  
AVENTURA FL 33180

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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS

TITLE	VSD	<input type="checkbox"/> DELETE
NAME	BURCHIETTI, JAMIE	
STREET ADDRESS	20185 E. COUNTRY CLUB DR.	
CITY-ST-ZIP	N.M. BEACH FL	
TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	HARRIS, JACK	
STREET ADDRESS	20185 E COUNTRY CLUB DR	
CITY-ST-ZIP	N MIAMI BCH. FL	
TITLE	VTD	<input type="checkbox"/> DELETE
NAME	NESBIT, MAIRAN	
STREET ADDRESS	20185 E COUNTRY CLUB DR	
CITY-ST-ZIP	N MIAMI BCH. FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	PRESIDENT D <input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	NESBITT, MARIAN
3.3 STREET ADDRESS	20185 E. COUNTRY CLUB DR
3.4 CITY-ST-ZIP	AVENTURA, FL 33181
4.1 TITLE	VD <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	ROYAL FLAGG JONAS
4.3 STREET ADDRESS	20185 E. COUNTRY CLUB DR.
4.4 CITY-ST-ZIP	AVENTURA, FL 33181
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME	
6.3 STREET ADDRESS	
6.4 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 changed, or on an attachment with an address.

SIGNATURE \_\_\_\_\_

CR2E037 (9/96)