## FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

1996

DOCUMENT #

1. Corporation Name N32407

(1)

MIAMI LAKES-LAKE CAROL HOMEOWNERS' ASSOCIATION, INC.



Principal Place o	or Business	Mailing Address			
C/O JOSEPH H		P.O. BOX 4544			
14733 BRECKN		MIAMI LAKES FL 33014 US			
MIAMI LAKES FL 33016		us		3. Date incorporated or Qualified 05/19/1989	3a. Date of Last Report 03/03/1995
9 Principal Plac	on of Rusiness	2a, Mailing Address		4. FEI Number	Applied For
Principal Place of Business 21		26		65-0159373	Not Applicable
Suite, Apt. #, etc.		Suite, Apt. #, etc.			\$8.75 Additional
		27		5. Certificate of Status Desired	Fee Hequired
City & State		City & State		6. Election Campaign Financing	\$5.00 May Be
23		28		Trust Fund Contribution	— Added to Fees
Zip	Country	Žip	Country	8. This corporation has liability for	Intangible tax under s. 199.032,  Yes No
24	25	29	[30]	Florida Statutes  10. Name and Address of New	
	9. Name and Address of C	urrent Registered Agent	81 Name		
				Joseph Harvest	)
CAPODIF	ERRO, ANDREW		82 Street A	ddress (P.O. Box Number is Not Accepta	bie) Olasa
14653 BF	RECKNESS PLACE		83	1733 BRECKNESS	11700
P.O. BOX	( 5227 N/A		83		
MIAMI LA	KES FL 33016		B4 City		85 Zip Code
			Mil	ami Lakes	FL 33016
11. Pursuant to	o the provisions of Sections 317	.0502 and 617,1508, Florida Statute	s, the above-named cor	rporation submits this statement for the proporation submits this statement for the appropriate and the appropriate appropriat	urpose of changing its registered offici pointment as registered agent. I am
	salesalist or both in the STATE O	r Fiorida. Sport change was parquite	to by the corporation as	304.4 0, 000.818	•
or registere familiar with	h and accept the obligations of	Section 617.0503, Florida Statutes.			
	h, and accept the obligations of	.0502 and 617 1508, Florida Statute if Florida. Such change was amborize , Section 617.0503, Florida Statutes.	edent		
or registere familiar with SIGNATURE	Signifure, type of inted name of agistare	6d agent and title if applicable. (NOT	TE: Registered Agent signature re	quired when reinstating)	DATE
	Signifure, type of inted name of agistare	60 ageh; and tide if applicable. (NOT RS AND DIRECTORS	TE: Registered Agent signature re	quired when reinstating) ADDITIONS/CHANGES TO OF	DATE FICERS AND DIRECTORS IN 12
SIGNATURE	Signifure, type of inted name of agistare	6d agent and title if applicable. (NOT	TE: Registered Agent signature re	quired when reinstating! ADDITIONS/CHANGES TO OF	DATE FICERS AND DIRECTORS IN 12 Change Addition
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SIGNATURE 5  12.  TITLE	Signature, type Wanted name of posters OFFICER	60 ageh; and tide if applicable. (NOT RS AND DIRECTORS	TE: Registered Agent signature re 13. 1.1 TiTLE	ADDITIONS/CHANGES TO OF TREASULUL Thomas Courter 14757 BROCK NEWS	DATE FICERS AND DIRECTORS IN 12 Cychange Addition
SIGNATURE STREET ADDRESS	OFFICER  CONROY, THOMAS	5d agek; and tide if applicable. (NOT RS AND DIRECTORS	TE: Registered Agent signature re 13. 1.1 TiTLE 12 NAME	quired when reinstating! ADDITIONS/CHANGES TO OF	DATE FICERS AND DIRECTORS IN 12 Cychange Addition
SIGNATURE 5  12.  TITLE NAME	OFFICER  CONROY, THOMAS 14757 BRECKNESS PL	60 ageh; and tide if applicable. (NOT RS AND DIRECTORS	TE: Registered Agent signature re  13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS	ADDITIONS/CHANGES TO OF TREASULUL Thomas Courter 14757 BROCK NEWS	DATE FICERS AND DIRECTORS IN 12 Cychange Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CHY-ST-ZIP  TITLE	OFFICER  CONROY, THOMAS  14757 BRECKNESS PL  MIAMI LAKES FL	5d agek; and tide if applicable. (NOT RS AND DIRECTORS	TE: Registered Agent signature re  13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP	ADDITIONS/CHANGES TO OF TREASULUL Thomas Courter 14757 BROCK NEWS	DATE FICERS AND DIRECTORS IN 12 Change Addition
SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CHY-ST-ZIP  TITLE  NAME	OFFICER  D CONROY, THOMAS 14757 BRECKNESS PL MIAMI LAKES FL VD	5d agek; and tide if applicable. (NOT RS AND DIRECTORS	TE: Registered Agent signature re  13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE	ADDITIONS/CHANGES TO OF TREASULUL Thomas Courter 14757 BROCK NEWS	DATE FICERS AND DIRECTORS IN 12 Change Addition
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SIGNATURE  12.  TITLE  NAME  STREET ADDRESS  CITY-ST-ZIP  TITLE  NAME	D CONROY, THOMAS 14757 BRECKNESS PL MIAMI LAKES FL VD WHITTEN, ANITA 8571 ARDOCH ROAD MIAMI LAKES FL 33016 TD SALISS, MORISS 8547 ARDOCH ROAD MIAMI LAKES FL 33016 PD CAPODIFERRO, ANDRE 14653 BRECKNESS PL MIAMI LAKES FL D HARVEST, JOSEPH 14733 BRECKNESS PL	Sol agels: and title if applicable. [NOT ARS AND DIRECTORS   DELETE     DELETE     DELETE     DELETE     DELETE     ACE     DELETE     DELETE     DELETE     DELETE     DELETE	TE: Fegistered Agent signature re  13.  1.1 Title 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 22 NAME 23 STREET ADDRESS 2.4 CITY-ST-ZIP 31 TITLE 32 NAME 33 STREET ADDRESS 34. CITY-ST-ZIP 4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP 5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 5.4 CITY-ST-ZIP 6.1 TITLE 6.2 NAME	DIRECTOR CAPODICA  TREASULENCE  TREASULENCE  Thomas Govilla  14757 Breck Neve  MIAMI LAKES FI  DIRECTOR  MIAMI LAKES FI  ANDREW CAPODICE  HOS3 BRECKNESS  MIAMI LAKES FI  PRESIDENT  TOSEPH HARVEST  14733 BRECKNESS  MIAMI LAKES  MIAMI LAKES  MIAMI LAKES  FI  TOSEPH HARVEST  14733 BRECKNESS  MIAMI LAKES	DATE FICERS AND DIRECTORS IN 12  Change Addition
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rido nereby certify triat the information supplied with this limit is voluntarian burner to the certify that the information indicated on this 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 of 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:

IND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

CR2E037 (12/95)