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Jan 17 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # N36151 (1)

1. Corporation Name

LAKES ON THE GREEN HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business

Mailing Address

C/O D C I
2901 SIMMS ST
HOLLYWOOD FL 33020

C/O D C I
2901 SIMMS ST
HOLLYWOOD FL 33020-1510

3. Date Incorporated or Qualified
01/18/1990

3a. Date of Last Report
03/06/1996

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

4. FEI Number
59-1730943

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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes

Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

MEYROWITZ, ANDREW
C/O D C I
2901 SIMMS ST
HOLLYWOOD FL 33020

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

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 PD
NAME YOUNTS, SA
STREET ADDRESS 6843 MAIN STR
CITY-ST-ZIP MIAMI FL
 DELETE

1.1 TITLE VP/D
1.2 NAME GARCIA, LEOPOLDO
1.3 STREET ADDRESS 8985 NW 188TH TERR
1.4 CITY-ST-ZIP MIAMI, FL
 Change Addition

TITLE TD
NAME FALCO, GREG
STREET ADDRESS 6843 MAIN ST
CITY-ST-ZIP MIAMI FL
 DELETE

2.1 TITLE TD
2.2 NAME GONZALEZ, PEDRO
2.3 STREET ADDRESS 8986 NW 188TH TERR
2.4 CITY-ST-ZIP MIAMI, FL
 Change Addition

TITLE SD
NAME HERNANDEZ, SIXTO
STREET ADDRESS 8870 NW 196TH ST
CITY-ST-ZIP MIAMI FL
 DELETE

3.1 TITLE PD
3.2 NAME HERNANDEZ, SIXTO
3.3 STREET ADDRESS 8870 NW 196TH ST
3.4 CITY-ST-ZIP MIAMI, FL
 Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
 DELETE

4.1 TITLE SD
4.2 NAME FLUHART, CYNTHIA
4.3 STREET ADDRESS 8741 NW 189TH TERR
4.4 CITY-ST-ZIP MIAMI, FL
 Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
 DELETE

5.1 TITLE D
5.2 NAME CANCIO, HUGO
5.3 STREET ADDRESS 8757 NW 189TH TERR
5.4 CITY-ST-ZIP MIAMI, FL
 Change Addition

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
 DELETE

6.1 TITLE D
6.2 NAME MYLES, MICHAEL
6.3 STREET ADDRESS 18721 NW 88TH COURT
6.4 CITY-ST-ZIP MIAMI, FL
 Change Addition

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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-9-97

Date

Daytime Phone # 0021266

CR2E037 (9/96)