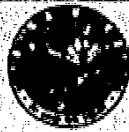


FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

55 MAY -1 AM 11:42

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # N36336

(8)

1. Corporation Name

MEADOWBROOK LAKES VIEW CONDOMINIUM ASSOCIATION
C. INC.

Principal Place of Business

170 S.E. 5TH AVENUE
DANIA FL 33004

Mailing Address

170 S.E. 5TH AVENUE
DANIA FL 33004

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified

01/29/1990

3a. Date of Last Report

07/07/1994

4. FEI Number

59-2997200

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

☒

\$68.75 Supplemental
Fee Not Required

8. This corporation has liability for intangible tax under S. 190.032,
Florida Statutes ☐ Yes ☒ No

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

RANELLI, VINCENT
190 S.E. 5TH AVENUE, #504
DANIA FL 33004

81 Name

John Esposito

82 Street Address (P.O. Box Number is Not Acceptable)

190 S.E. 5th Ave # 408

84 City

Dania

FL

85 Zip Code

33004

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE

John Esposito

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reappointing)

DATE

4/25/95

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE

PD

NAME

RANELLI, VINCENT

STREET ADDRESS

190 S.E. 5TH AVENUE, #504

CITY - ST - ZIP

DANIA FL 33004

TITLE

VD

NAME

CORBEIL, FERNAND

STREET ADDRESS

190 S.E. 5TH AVENUE, #507

CITY - ST - ZIP

DANIA FL 33004

TITLE

STD

NAME

ESPOSITO, JOHN

STREET ADDRESS

190 S.E. 5TH AVENUE, #408

CITY - ST - ZIP

DANIA FL 33004

TITLE

PD

NAME

PASCALE, FRANK

STREET ADDRESS

170 S.E. 5TH AVENUE, #307

CITY - ST - ZIP

DANIA FL 33004

TITLE

D

NAME

SHARRON, CLAIRE

STREET ADDRESS

170 S.E. 5TH AVENUE, #407

CITY - ST - ZIP

DANIA FL 33004

TITLE

D

NAME

DEVINE, THOMAS

STREET ADDRESS

170 S.E. 5TH AVENUE, #508

CITY - ST - ZIP

DANIA FL 33004

1.1 TITLE

TD

1.2 NAME

Perrota, Tony

1.3 STREET ADDRESS

170 S.E. 5th Ave # 305N

1.4 CITY - ST - ZIP

Dania, FL 33004

2.1 TITLE

TD

2.2 NAME

Di Fernando Carmela

2.3 STREET ADDRESS

170 S.E. 5th Ave #104N

2.4 CITY - ST - ZIP

Dania, FL 33004

3.1 TITLE

TD

3.2 NAME

Juliano, Ralph

3.3 STREET ADDRESS

190 S.E. 5th Ave #201M

3.4 CITY - ST - ZIP

Dania, FL 33004

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

6.4 CITY - ST - ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 110.07(3)(b), 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 817, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

Thomas Devine
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

V.P. PRESIDENT

March 8/95

922.6167

Date

Signature Number