FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 APR -7 AM 11:09

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N43384** **(9)**

1. Corporation Name

LAKEVIEW TOWNHOMES AT THE CALIFORNIA CLUB CONDOMINIUM ASSOCIATION, INC.

DO NOT WRITE IN THIS SPACE

Principal Place of Business	Mailing Address
20834 SAN SIMEON WAY SUITE 65 C N. MIAMI BEACH FL 33179	20834 SAN SIMEON WAY SUITE 65 C N. MIAMI BEACH FL 33179

3. Date Incorporated or Qualified: 05/13/1991
3a. Date of Last Report: 04/13/1994
4. FEI Number: 65-0260339 ☐ Applied For ☐ Not Applicable

2. Principal Place of Business (21)	c/oMiami Management	
Suite, Apt. #, etc. (22)	P.O. Box 801338	
City & State (23)	Aventura FL 33180-3701	
Zip (24) / Country (25)		
2a. Mailing Address (26)	c/o Miami Management	
Suite, Apt. #, etc. (27)	P.O. Box 801338	
City & State (28)	Aventura Fl 33180-3701	
Zip (29) / Country (30)		

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. 199.032, Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

CAPITAL CONNECTION
417 EAST VIRGINIA STREET
SUITE 1
TALLAHASSEE FL 32301

10. Name and Address of New Registered Agent

81 Name: Jeremy A. Koss, Esq.
82 Street Address (P.O. Box Number is Not Acceptable): Buchanan Ingersoll, Professional Corp.
83: 19495 Biscayne Blvd., Suite 606
84 City: N. Miami Beach **FL** 85 Zip Code: 33180

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 _____ DATE 3-30-95
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	P	11 TITLE	☐ Change ☐ Addition
NAME	ROCKOWITZ, ELIZABETH	12 NAME	
STREET ADDRESS	20834 SAN SIMEON WAY #65C	13 STREET ADDRESS	
CITY-ST-ZIP	NO MIAMI BCH FL 33179	14 CITY-ST-ZIP	
TITLE	V	21 TITLE	☐ Change ☐ Addition
NAME	WOOGIN, MELISSA	22 NAME	
STREET ADDRESS	20834 SAN SIMEON WAY #65C	23 STREET ADDRESS	
CITY-ST-ZIP	NO MIAMI BCH FL 33179	24 CITY-ST-ZIP	
TITLE	S	31 TITLE	☐ Change ☐ Addition
NAME	BERKEM, LAURIE	32 NAME	
STREET ADDRESS	20834 SAN SIMEON WAY #65C	33 STREET ADDRESS	
CITY-ST-ZIP	NO MIAMI BCH FL 33179	34 CITY-ST-ZIP	
TITLE	TD	41 TITLE	☐ Change ☐ Addition
NAME	TACHE, TEANA	42 NAME	
STREET ADDRESS	20834 SAN SIMEON WAY #65C	43 STREET ADDRESS	
CITY-ST-ZIP	NO. MIAMI BCH. FL 33179	44 CITY-ST-ZIP	
TITLE	D	51 TITLE	☐ Change ☐ Addition
NAME	ALEXANDER, DIANE	52 NAME	
STREET ADDRESS	20834 SAN SIMEON WAY, #65C	53 STREET ADDRESS	
CITY-ST-ZIP	N. MIAMI BCH. FL 33179	54 CITY-ST-ZIP	
TITLE	D	61 TITLE	☐ Change ☐ Addition
NAME	HOWERTON, RICHARD	62 NAME	
STREET ADDRESS	20834 SAN SIMEON WAY, #65C	63 STREET ADDRESS	
CITY-ST-ZIP	N. MIAMI BCH. FL 33179	64 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 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: _____ 3/22/95 454-9482
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0044858