FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION **ANNUAL REPORT**

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT #

(1)

FILLD								
Apr 23 1998 8:00am								
Secretary of State								

EII ED

CLEARBROOK VILLAGE, INC.								
Principal Plac	e of Business	Mailing Address				L sanssins die Arbei dellie bille delle fall dit	for medit milit arate a	ION MION INGS
10780 CEDAR POINT BLVD. BOYNTON BEACH FL 33437 10780 CEDAR POINT BLVD. BOYNTON BEACH FL 33437						3. Date Incorporated or Qualified 07/12/1991		
						4. FEI Number 65-0301722		pplied For ot Applicable
2. Principal Place of Business 2a. Mailing Address 21 26			.,			5. Certificate of Status Desired	\$8.75	Additional equired
Suite, Apt. #, etc. Suite, Apt. #, etc.						6. Election Campaign Financing	\$5.00	
22 27						Trust Fund Contribution	Added to	
City & Stat	€	City & State				7. Is this nonprofit corporation a homeowners association?		
Zip	Country	Zip	Cour	ntry		8. This corporation owes or has paid the	a current year in	tangible
24	25	29	30			Personal Property Tax due June 30.		□ No
	9. Name and Address of Curren	t Registered Agent		. ,		10. Name and Address of New Registe	red Agent	
]			ľ	81	Name			
CUSTOM PROPERTY MANAGEMENT, INC.				82	Street Ad	dress (P.O. Box Number is Not Acceptable)		•
2328 SOUTH CONGRESS AVENUE,M SUITE 2A			ŀ	83				
WEST P	ALM BEACH FL 33406							
				84 0		1	FI 85 Zip	Code
11. Pursuant	to the provisions of Sections 617.050.	2 and 617.1508, Florida Statut	tes, the ab	XV9-I	named co			ts registered
SIGNATURE						rporation submits this statement for the purpo- ation's board of directors. I hereby accept the	appointment as	registered
12.	Signature, typed or printed name of registered age			Agent	signature req		AND DIDECTOR	2C IN 10
TITLE	PD OFFICERS AND	ICERS AND DIRECTORS DELETE		13.		ADDITIONS/CHANGES TO OFFICERS	Change	Addition
NAME	LAZOFF, MARNIV	X been	1.2 NA				Olavilge	7,00,110,11
STREET ADDRESS	10031 53RD WAY SO. #2102		1		DDRESS			
CITY-ST-ZIP	DELRAY BCH FL		1.4 CHY-ST-ZIP					
TITLE	VPD DELETE		_	2.1 TITLE			☐ Change	Addition
NAME	CUTLER, PHILIP		2.2 NAJ	2.2 NAME				
STREET ADDRESS	10063 53RD WAY SO 701		2.3 STR	REET AL	DORESS			
CITY-ST-ZIP	BOYNTON BEACH FL		2. 4 CIT	TY-ST-	- ZIP			<u></u>
TITLE	TR DELETE		3.1 TITE	3.1 TITLE			Change	Addition
NAME	SAFTON, GERALD		3.2 NAM	ME	ļ			
STREET ADDRESS	10011 53RD WAY SO 1502		3.3 STR	REET A	DORESS			
CITY-ST-ZIP	BOYNTON BEACH FL		_	3 4. CITY- ST- ZIP			Chance	Addition
TITLE	S DADVO DIOLIADO	XX DELETE		4 1 TITLE 4. 2 NAME		D	XX Change	Addition
NAME	PARKS, RICHARD					ARKS, RICHARD		
STREET ADDRESS	10011 53 WAY SO 1501			4.3 STREET ADDRESS 4.4 CITY-ST-ZIP		0011 53 WAY SO 1501		
CITY-ST-ZIP TITLE	BOYNTON BEACH FL	XX DELETE			ZIP):	SOYNTON BEACH FL	KChange	Addition
NAME	DR HIRSCHAUT, ROBERT	ATTA OFFICE		5.1 TITLE 5.2 NAME		SEC D.4 HIRSCHAUT, ROBERT		
STREET ADDRESS	10047 53 WAY SO 901		5.3 STR			0047 53 WAY SO 901		
CITY-ST-ZIP	BOYNTON BEACH FL		5.4 CIT		-	BOYNTON BEACH, FL.		
TITLE		☐ DELETE	6.1 TITL				Change	X Addition
NAME			6.2 NA		1	IR	,	
STREET ADDRESS					DDRESS W	EINSTEIN, FRED		
CITY OF THE			6.4 607		710	0063 53 WAY SÕ 702		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 19.07(5/ft). Portia states. 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:

GUND SOPTON MES