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Secretary of State

02-22-1999 90089 040 ****61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999	 FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
DOCUMENT # N93000003590 1. Corporation Name DANIA HISTORIC ANTIQUE DISTRICT ASSOCIATION, INC	
Principal Place of Business 19 N FEDERAL HWY DANIA FL 33004	Mailing Address P.O. BOX 845 DANIA FL 33004-0845 US

281004 - 90089 - 26



2. Principal Place of Business	2a. Mailing Address	3. Date Incorporated or Qualified
21	26	08/09/1993
Suite, Apt. #, etc.	Suite, Apt. #, etc.	4. FEI Number
22	27	65-0435341
City & State	City & State	Applied For
23	28	Not Applicable
Zip	Zip	5. Certificate of Status Desired
24	29	<input type="checkbox"/> \$8.75 Additional Fee Required
Country	Country	6. Election Campaign Financing Trust Fund Contribution
25	30	<input type="checkbox"/> \$5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent	10. Name and Address of New Registered Agent
LEHMAN, RICHARD 3 N FEDERAL HWY DANIA FL 33004	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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	D <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME	BEAUDET, PHYLYSS Director	1.2 NAME	GARLOCK, Elinor Director
STREET ADDRESS	56 N FEDERAL HWY	1.3 STREET ADDRESS	3 N Federal Hwy
CITY-ST-ZIP	DANIA FL 33004	1.4 CITY-ST-ZIP	Dania, FL 33004
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LEHMAN, RICHARD President	2.2 NAME	
STREET ADDRESS	3 N FEDERAL HWY	2.3 STREET ADDRESS	
CITY-ST-ZIP	DANIA FL	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	Spelling <input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	CHRIST-MORALE, CAROL Director	3.2 NAME	CHRIST-MORAL, CAROL
STREET ADDRESS	26 N FEDERAL HWY	3.3 STREET ADDRESS	
CITY-ST-ZIP	DANIA FL 33004	3.4 CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		4.2 NAME	BENE-NORALE
STREET ADDRESS		4.3 STREET ADDRESS	3 N FEDERAL HWY
CITY-ST-ZIP		4.4 CITY-ST-ZIP	DANIA FL 33004 Vice President
TITLE	<input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		5.2 NAME	MICHAEL T PHE
STREET ADDRESS		5.3 STREET ADDRESS	3 N FEDERAL HWY
CITY-ST-ZIP		5.4 CITY-ST-ZIP	DANIA FL 33004 Treasurer
TITLE	<input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
NAME		6.2 NAME	GOLDIS LAST
STREET ADDRESS		6.3 STREET ADDRESS	10 N FEDERAL HWY
CITY-ST-ZIP		6.4 CITY-ST-ZIP	DANIA FL 33004 Director

14. I 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, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED 1/4/99 (954)922-5467
 SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR
 Richard Lehman, president
 Richard Lehman, prez.

CR2E037 (1/98)