

FILE NOW: FILING FEE IS \$61.25

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Apr 14 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Worthington Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N94000003297 (8)
 1. Corporation Name
LAKE PARK AT FOREST RIDGE HOMEOWNERS ASSOCIATION, INC.



Principal Place of Business 912 S.E. 17TH STREET SUITE 300 FORT LAUDERDALE FL 33324 US	Mailing Address 312 SE 17TH STREET SUITE 300 FORT LAUDERDALE FL 33324 US
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3. Date Incorporated or Qualified 06/28/1994
4. FEI Number 65-0534268
Applied For <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Not Applicable <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

2. Principal Place of Business 21 1067 Shotgun Road	2a. Mailing Address 26 1067 Shotgun Road
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23 Sunrise, Florida	City & State 28 Sunrise, Florida
Zip 24 333266	Country 25 Broward
Zip 29 33326	Country 30 Broawrd

5. Certificate of Status Desired <input type="checkbox"/> \$8.75 Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/> \$5.00 May Be Added to Fees
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No

9. Name and Address of Current Registered Agent
**COLLINS, WALTER C
111 EAST LAS OLAS BLVD.
FORT LAUDERDAE FL 33301**

10. Name and Address of New Registered Agent
81 Name Louise Tudzarov
82 Street Address (P.O. Box Number is Not Acceptable) 345 W. Oakland Park Blvd.
83
84 City Ft. Lauderdale FL 85 Zip Code 33311

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 *Vincenzo Bordonaro* (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS	
TITLE NAME STREET ADDRESS CITY-ST-ZIP	PTD COLLINS, WALTER C 111 EAST LAS OLAS BLVD. FORT LAUDERDAE FL 33301 <input checked="" type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	VD CANTRELL, WILLIAM 111 EAST LAS OLAS BLVD. FORT LAUDERDAE FL 33301 <input checked="" type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	SD ADAMS, PHIL 111 EAST LAS OLAS BLVD. FORT LAUDERDAE FL 33301 <input checked="" type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE
TITLE NAME STREET ADDRESS CITY-ST-ZIP	<input type="checkbox"/> DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP	Vincenzo Bordonaro, P <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 9092 Lake Park Circle South Davie, FL 33328
2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	John Rowland, VP <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 9095 Lake Park Circle South Davie, FL 33328
3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY-ST-ZIP	Mary Raff, S/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 8910 Lake Park Circle North Davie, FL 33328
4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY-ST-ZIP	Ralph Slavin, T/D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 9020 Lake Park Circe North Davie, FL 33328
5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY-ST-ZIP	George Volpe, D <input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition 9162 Lake Park Circle South Davie, FL 33328
6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP	<input type="checkbox"/> Change <input type="checkbox"/> Addition

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.

SIGNATURE: *Vincenzo Bordonaro* **VINCENZO BORDONARO** Feb 19, 1998

CR2E037 (10/97)