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

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
95 FEB 23 PM 3:27

DOCUMENT # **762640** **(1)**

1. Corporation Name

THE HAMMOCKS-LAKE FOREST CONDOMINIUM ASSOCIATION , INC.

Principal Place of Business	Mailing Address
1801 HAMMOCK BLVD. COCONUT CREEK FL 33063-7729	1801 HAMMOCK BLVD. COCONUT CREEK FL 33063-7729

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 03/29/1982
3a. Date of Last Report: 02/18/1994
4. FEI Number: 59-2273094 ☐ 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. 199.032, Florida Statutes ☒ Yes ☐ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

ZUCKER, DAVID
1818 HAMMOCK BLVD.
COCONUT CREEK FL 33063

10. Name and Address of New Registered Agent

81 Name: Reinstein, Sol
82 Street Address (P.O. Box Number is Not Acceptable): 1716 Hammock Blvd.
83
84 City: Coconut Creek FL 85 Zip Code: 33063

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: Sol Reinstein — Sol Reinstein — February 11, 1995
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when mail-in filing) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	SD	11 TITLE	PD ☒ Change ☐ Addition
NAME	REINSTEIN, SOL	12 NAME	Reinstein, Sol
STREET ADDRESS	1716 HAMMOCK BLVD	13 STREET ADDRESS	1716 Hammock Blvd
CITY-ST-ZIP	COCONUT CREEK FL	14 CITY-ST-ZIP	Coconut Creek, Fl 33063
TITLE	TD	21 TITLE	[illegible] ☐ Change ☒ Addition
NAME	SIEGMAN, MORRIS	22 NAME	Mendez, David
STREET ADDRESS	1748 HAMMOCK BLVD.	23 STREET ADDRESS	1848 Hammock Blvd (MENDEZS)
CITY-ST-ZIP	COCONUT CREEK FL	24 CITY-ST-ZIP	Coconut Creek Fl,33063
TITLE	PD	31 TITLE	TD ☐ Change ☒ Addition
NAME	ZUCKER, DAVID	32 NAME	Basile, Robert
STREET ADDRESS	1818 HAMMOCK BLVD.	33 STREET ADDRESS	1760 Hammock Blvd
CITY-ST-ZIP	COCONUT CREEK FL	34 CITY-ST-ZIP	Coconut Creek Fl,33063
TITLE	D	41 TITLE	☐ Change ☐ Addition
NAME	CORWIN, SANFORD	42 NAME	
STREET ADDRESS	1718 HAMMOCK BLVD	43 STREET ADDRESS	
CITY-ST-ZIP	COCONUT CREEK FL	44 CITY-ST-ZIP	
TITLE	D	51 TITLE	☐ Change ☐ Addition
NAME	SAPIENZA, SABASTIANO	52 NAME	
STREET ADDRESS	1719 HAMMOCK BLVD	53 STREET ADDRESS	
CITY-ST-ZIP	COCONUT CREEK FL	54 CITY-ST-ZIP	
TITLE		61 TITLE	☐ Change ☐ Addition
NAME		62 NAME	
STREET ADDRESS		63 STREET ADDRESS	
CITY-ST-ZIP		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: Sol Reinstein (Sol Reinstein) — Oct 11, 1995 — (305) 979-7825
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0039041