

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION ANNUAL REPORT 1995				FLORIDA DEPARTMENT OF STATE Sandra B. Morthum Secretary of State DIVISION OF CORPORATIONS		FILED SECRETARY OF STATE DIVISION OF CORPORATIONS		FILED SECRETARY OF STATE DIVISION OF CORP	
DOCUMENT # N49598 (8) 1. Corporation Name 8382 HOME ASSOCIATION, INC.				95 MAY 23 PM 1:09		95 MAY 23 PM			
Principal Place of Business 7450 STIRLING RD HOLLYWOOD FL 33024				Mailing Address 1100 NW 70TH TERR PLANTATION FL 33313 US				DO NOT WRITE IN THIS SPACE	
				3. Date Incorporated or Qualified 06/29/1992		3a. Date of Last Report 08/05/1994			
				4. FEI Number NOT APPLICABLE		Applied For ☐		Not Applicable ☒	
2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip Country				2a. Mailing Address 25 Suite, Apt. #, etc. 27 City & State 28 Zip Country				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 COSENTINO, ROBERT 300 SW 70 TERRACE PEMBROKE PINES FL 33023				10. Name and Address of New Registered Agent 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 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 _____ (Signature, typed or printed name of registered agent and title if applicable) (NOTE: Registered Agent signature required when re-registering) DATE _____									
12. OFFICERS AND DIRECTORS					13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12				
TITLE	VD				1.1 TITLE	☐ Change ☐ Addition			
NAME	CASSERLY, THOMAS				1.2 NAME				
STREET ADDRESS	9020 SW 55 ST				1.3 STREET ADDRESS				
CITY - ST - ZIP	COOPER CITY FL				1.4 CITY - ST - ZIP				
TITLE	PD				2.1 TITLE	☐ Change ☐ Addition			
NAME	COSENTINO, ROBERT				2.2 NAME				
STREET ADDRESS	300 SW 70 TERR				2.3 STREET ADDRESS				
CITY - ST - ZIP	PEMBROKE PINES FL				2.4 CITY - ST - ZIP				
TITLE	SD				3.1 TITLE	☒ Change ☐ Addition			
NAME	DEPIANO, PETER				3.2 NAME	SD			
STREET ADDRESS	7021 PARK ST				3.3 STREET ADDRESS	DELPiANO, PETER			
CITY - ST - ZIP	HOLLYWOOD FL				3.4 CITY - ST - ZIP	1820 NW 87 AVE			
TITLE	TD				4.1 TITLE	☐ Change ☐ Addition			
NAME	TOTH, ALBERT				4.2 NAME				
STREET ADDRESS	1100 N.W 70TH TERR				4.3 STREET ADDRESS				
CITY - ST - ZIP	PLANTATION FL				4.4 CITY - ST - ZIP				
TITLE					5.1 TITLE	☐ Change ☐ Addition			
NAME					5.2 NAME				
STREET ADDRESS					5.3 STREET ADDRESS				
CITY - ST - ZIP					5.4 CITY - ST - ZIP				
TITLE					6.1 TITLE	☐ Change ☐ Addition			
NAME					6.2 NAME				
STREET ADDRESS					6.3 STREET ADDRESS				
CITY - ST - ZIP					6.4 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 110.07(3)(k), 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: <i>Peter Del Piano</i>					Peter Del Piano Sec. 1-25-95 3054368692				
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR					DATE				