

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1996



FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 737127 (1)

1. Corporation Name:

EAST WIND LAKE VILLAGE CONDOMINIUM ASSOCIATION,  
INC.



Principal Place of Business

461 N.W. 98 CT.  
MIAMI FL 33172

Mailing Address

P.O. BOX 526500  
MIAMI FL 33152-6500  
US

3. Date Incorporated or Qualified  
10/25/1976

3a. Date of Last Report  
05/01/1995

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip

25 Country

28 Zip

30 Country

4. FEI Number  
59-1721248

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

8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

LOURDES DELGADO del-CALVO  
461 N.W. 98 CT.  
MIAMI FL 33172

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

Signature, typed or printed name of registered agent and the date it applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE D ☒ DELETE  
NAME TOLON, MARIA  
STREET ADDRESS 461 N.W. 98TH CT.  
CITY-ST-ZIP MIAMI, FL 00000

11 TITLE JACK PETERSON ☐ Change ☒ Addition  
12 NAME VICE-TREASURER  
13 STREET ADDRESS 461 N.W. 98 CT.  
14 CITY-ST-ZIP MIAMI, FL 33172

TITLE P ☐ DELETE  
NAME GONZALEZ, CRISTINA  
STREET ADDRESS 461 N.W. 98TH CT.  
CITY-ST-ZIP MIAMI, FL 00000 33172

21 TITLE MARILYN YUNIS ☐ Change ☒ Addition  
22 NAME DIRECTOR  
23 STREET ADDRESS 461 N.W. 98 CT.  
24 CITY-ST-ZIP MIAMI, FL 33172

TITLE D ☒ DELETE  
NAME AZOY, JORGE  
STREET ADDRESS 461 N.W. 98TH CT.  
CITY-ST-ZIP MIAMI, FL 00000 33172

31 TITLE ☐ Change ☐ Addition  
32 NAME  
33 STREET ADDRESS  
34 CITY-ST-ZIP

TITLE D ☐ DELETE  
NAME CARDELLE, THAIS  
STREET ADDRESS 461 N.W. 98TH CT.  
CITY-ST-ZIP MIAMI, FL 00000 33172

41 TITLE ☐ Change ☐ Addition  
42 NAME  
43 STREET ADDRESS  
44 CITY-ST-ZIP

TITLE VP ☐ DELETE  
NAME NEVINS, FREEMAN J.  
STREET ADDRESS 461 N.W. 98TH CT.  
CITY-ST-ZIP MIAMI, FL 00000 33172

51 TITLE 9000018439 ☐ Change ☐ Addition  
52 NAME -05/30/96--01017--004  
53 STREET ADDRESS \*\*\*61.25  
54 CITY-ST-ZIP

TITLE ☐ DELETE  
NAME SANTOS, FRANCISCO  
STREET ADDRESS 461 N.W. 98TH CT.  
CITY-ST-ZIP MIAMI, FL 00000 33172

61 TITLE ☐ Change ☐ Addition  
62 NAME  
63 STREET ADDRESS  
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)(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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone

CR2E037 (12/95)