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Feb 21 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # N38276 (4)

1. Corporation Name

HAWTHORNE AT CENTURY VILLAGE CONDOMINIUM #II ASS  
OCIATION, INC.

Principal Place of Business

Mailing Address

13550 S. W. 10TH STREET  
13460 SW 10TH ST. CENTURY VILLAGE  
PEMBROKE PINES FL 3302713550 S. W. 10TH STREET  
13460 SW 10TH ST. CENTURY VILLAGE  
PEMBROKE PINES FL 33027-1891

Arista South

2. Principal Place of Business

21 12289 Pembroke Rd

2a. Mailing Address

26 12289 Pembroke Rd

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22 Suite 106

27 Suite 106

23 Pembroke Pines, Fla

28 Pembroke Pines, Fla

24 33025

25 BROWARD

29 33025

30 Broward

9. Name and Address of Current Registered Agent

SCHNITZER, STEVE  
C/O PRIME MANAGEMENT  
1051 SOUTH ROGERS CIRCLE  
BOCA RATON FL 33487

10. Name and Address of New Registered Agent

81 Name Arista mgmt Lp South, Inc.

82 Street Address (P.O. Box Number is Not Acceptable) 12289 Pembroke Rd. Suite 106

83 c/o Charlie Daves

84 City Pembroke Pines

FL 85 Zip Code 33025

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 title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

Charles W Daves

1-23-97

12. OFFICERS AND DIRECTORS

TITLE DP  
NAME AUSLANDER, HERMAN  
STREET ADDRESS 12900 S. W. 13TH STREET  
CITY-ST-ZIP PEMBROKE PINES FLTITLE D  
NAME WIESENFELD, RUTH  
STREET ADDRESS 12950 SW 13TH ST  
CITY-ST-ZIP PEMBROKE PINES FLTITLE D  
NAME DASARO, GEORGE  
STREET ADDRESS 1300 SW 130TH AVE  
CITY-ST-ZIP PEMBROKE PINES FLTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIPTITLE  
NAME  
STREET ADDRESS  
CITY-ST-ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE  
1.2 NAME  
1.3 STREET ADDRESS  
1.4 CITY-ST-ZIP2.1 TITLE Director  
2.2 NAME Lou Nadelman  
2.3 STREET ADDRESS 12950 SW 13th St  
2.4 CITY-ST-ZIP P.P. Fla 330273.1 TITLE  
3.2 NAME  
3.3 STREET ADDRESS  
3.4 CITY-ST-ZIP4.1 TITLE Treasurer  
4.2 NAME Ron Schultz  
4.3 STREET ADDRESS 1200 SW 130th Ave.  
4.4 CITY-ST-ZIP Pembroke Pines, Fla 330275.1 TITLE  
5.2 NAME  
5.3 STREET ADDRESS  
5.4 CITY-ST-ZIP6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

14. I do 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone # 0024023

1-23-97

CP2E037 (9/96)