## **FILE NOW: FILING FEE IS \$61.25**

NONPROFIT
CORPORATION
ANNUAL REPORT

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FLORIDA DEPARTMENT OF STATE

## Sandra B. Mortham

	1997		Secretary of DIVISION OF COR						Secre	etary (	OI S	state
1. Corporation		N2621		(2)								
OLD C	utler sprii	NGS ASSOCIA	TION, INC.						T 40 00 100 1 100 110 110 110 110 110 110	Lunge ið de ælden áld	ni dada beder	#(A)  #(A)  1841
Principal Place	e of Business		Mailing Ad	dress					T TÅ BEGENDE DER TITTER BELIEB TIRR		1 M1811 #1811	Mitter Bilbit f&Bi
C/O DOHAN. HOLLY J 5737 SW 130 TERR MIAMI FL 33156			C/O DOHAN. HOLLY J 5737 SW 130 TERR MIAMI FL 33156-6468					3. Date Incorporated or Qual	find 3a Da	le of Last	Ranorl	
									05/02/1988	<b>54.</b> Da	02/29/1	996
·	lace of Business		2a. Mailing Address					4. FEI Number 65-0106181		<del></del>	Applied For	
Sulte, Apt.	#, etc.	26 Suite, A	Suite, Apt. #, etc.								Not Applicable Additional	
22			27						5. Certificate of Status Desire	d 🗆		Required
City & State			28	<del></del>					<ol><li>Election Campaign Financ Trust Fund Contribution</li></ol>	ing		O May Be d to Fees
Zip 24	26	Country	Zip 29		Cour	ntry		-	<ol> <li>This corporation has liability Florida Statutes</li> </ol>	y for intangible		s. 199.032,
24		Address of Curre		jent	1301			1	0. Name and Address of Ne	-		
				····		81	Name					
DOHAN, HOLLY J 5737 SW 130 TERR							Street Ac	ddress	(P.O. Box Number is Not Acc	eptable)		
MIAMI FL					ŀ	83						
**************************************					-	84	City				85 Zij	o Codo
						- 1	•			FL		
office or re	o the provisions egistered agent,	of Sections 617.050 or both, in the State	)2 and 617,1508, of Florida, Such	change was	tos, the ab authorized	ove by	named co the corpor	orporat ration's	tion submits this statement for s board of directors. I hereby	the purpose of accept the appo	changing Sintment a	its registered as registered
SIGNATURE _	m i <b>a</b> minar with, a	no accept the oblig	ations of Section	1617.0003, F	ionda Stat	леѕ						
	Signature, typed or pri	ited name of registered ag		. <b>(N</b> O		Ager	nt signature rei	tw berlup	nen reinstating)	DATE		
12.	PD	OFFICERS AN	ID DIRECTORS	DELETE	13. 1.1 Till	ı F			ADDITIONS/CHANGES TO	JEFICERS AND	Change	
NAME	DOHAN, HO	LLY J	•	Laj otten	1.2 NAI		1				L_ Onlange	/ [
STREET ADDRESS	5737 SW 13						ADDRESS					
CITY-ST-ZIP	MIAMI FL				1.4 CIT	Y-ST	- ZiP					
TITLE	VD		i	DELETE	2.1 1(1)		ł				Change	Addition
RAME	DOHAN, STE				2.2 NAI							
STREET ADDRESS CITY-ST-ZIP	5737 SW 13 MIAMI FL	UIENN			1		ADDRESS					
TITLE	ST			DELETE	2. 4 Cil 3.1 Till		1-28			····	Change	Addition
NAME	FAUX, PINK				3.2 NA	ME	1					j
STREET ADDRESS	5727 SW 13	o terr			3.3 STR	REET A	ADDRESS					
CITY-ST-ZIP	MIAMI FL			DELETÉ	3 4. CiT		- ZIP				Change	Later Co.
TITLE NAME			L	יין מנונונ	4.1 TITL 4. 2 NA		ľ				Change	Addition
STREET ADDRESS							ADDRESS					
CITY-ST-ZIP					4.4 CIT							
TITLE				DELETE	5.1 TITE	L <b>E</b>					Change	Addition
NAME					5.2 NAM							
STREET ADDRESS							NDORESS				ı	,
CITY-ST-ZIP TITLE				DELETE	5.4 CIT		-ZIP				Change	Addition
NAME			L		6.2 NAN						orange	
STREET ADDRESS							ADDRESS					1
CITY-ST-ZIP					6.4 CIT							

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.

Holly n. Dukow Collywallet

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**FILED** 

Apr 14 1997 8:00am