FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT 1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

| FILED | | | | | |
|--------------------|--|--|--|--|--|
| Mar 23 1998 8:00am | | | | | |
| Secretary of State | | | | | |

| DOCUMENT # 736760 | | | | | |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|----------------------------------------------------|------------------------------------------------------------------------------------------------------|----------------------------------------------------|--|
| The Banyans of South Mirami, A Condominium | | | | | |
| Principal Place of Business Mailing Address | | _ | | | |
| C/o The Foster Co. C/o The Foster Co. 12394 SW 82 Ave 12394 SW 82 Ave | | | 3. Date Incorporated or Qualified | | |
| 12394 SW 82 Ave | 12394 51 | u ba Ave | 12-23-76 | , | |
| Miami, F1 33156 Miami, F13. | | 1 33156 | 4. FEI Number | Applied For | |
| | | | 59-1923336 | Not Applicable | |
| 2. Principal Place of Business 2a. Mailing Address 25 | | | 5. Certificate of Status Desired | \$8.75 Additional Fee Required | |
| Suite, Apt. #, etc. | | | 6. Election Campaign Financing | \$5.00 May Be | |
| City & State | City & State | · | Trust Fund Contribution | Added to Fees | |
| 23 | 28 | | 7. Is this nonprofit corporation a homeown Yes | No | |
| Zip Country | Zip | Country | 8. This corporation owes or has paid the o | | |
| 24 25 | | 30 | Personal Property Tax due June 30. | Yes No | |
| 9. Name and Address of Curren | | | 10. Name and Address of New Registere | d Agent | |
| % The Focter Co | mpany | 81 Name | | | |
| 12394 SW 82 | Ave | 82 Street Add | ress (P.O. Box Number is Not Acceptable) | | |
| Miami, Flori | ida 33156 | 83 | | | |
| AH: EnJoseph Scot | + | 84 City | F | L 85 Zip Code | |
| 11. Pursuant to the provisions of Sections 617,050 office or registered agent or both, in the State | 2 and 617.1508, Florida Stat ute: of Florida. Such chan ge wa s au | s, the above-named cor uthorized by the corpora | poration submits this statement for the purpose ition's board of directors. I hereby accept the æ | of changing its registered gointment as registered | |
| agent I am familiar with and accept the obligations of, Section 617, 503, Florida Statutes. | | | | | |
| SIGNATURE Speakure, typed of printed name of registered age | the and talle it equipments (NOTE | Registered Agent signature requ | ired when re-nistating) DATE | 9 | |
| 12. OFFICERS AND | · · · · · · · · · · · · · · · · · · · | 13. | ADDITIONS/CHANGES TO OFFICERS AF | ND DIRECTORS IN 12 | |
| TITLE PD | ☐ DELETE | 1.1 TITLE | | Change Addition | |
| NAME Rudy Fretz STREET ADDRESS 6611 SW 71 LF | | 1.2 NAME | | | |
| | | 1.3 STREET ADDRESS | | | |
| CITY-ST-ZIP Miami, Fl. 3 | | 1.4 CITY-ST-ZIP | | D Observed T Adams | |
| MILE VPD | ☐ DELETÉ | 2.1 TITLE | | ☐ Change ☐ Addition | |
| STREET ADDRESS 6660 SW 70 Terr | | 2.2 NAME | | | |
| STREET ADDRESS 6660 SW 70 Per | | 2.3 STREET ADDRESS | | | |
| TITLE 3D | DELETE | 2.4 CITY-ST-ZIP 3.1 TITLE | | ☐ Change ☐ Addition | |
| NAME Frank miller | | 3.2 NAME | | | |
| STREET ADDRESS 6641 5W 70 L | ane | 3.3 STREET ADDRESS | | | |
| | 3143 | 3.4. CITY - ST - ZIP | | | |
| TITLE TO | ☐ DELETE | 4.1 TITLE | | ☐ Change ☐ Addition | |
| NAME mitchell Kelly | | 4. 2 NAME | | | |
| STREET ADDRESS 7075 SW67 AVE | | 4.3 STREET ADDRESS | | | |
| | 33143 | 4.4 CITY-ST-ZIP | | | |
| TOTALE TO STATE OF THE STATE OF | DELETE | 5.1 TITLE | 2000024648 -03/23/9801013 | Addition Addition | |
| NAME Michael Bink | | 5.2 NAME | -03/23/9801013 | 031 | |
| STREET ADDRESS 6680 5W 70 L | _ Aりど 35143 | 5.3 STREET ADDRESS | ***61.25 | | |
| TITLE | DELETE | 5.4 CITY-ST-ZIP 6.1 TITLE | | ☐ Change ☐ Addition | |
| NAME | | 6.2 NAME | | | |
| STREET ADDRESS | | 63 STREET ADDRESS | , | ころう | |
| CITY-ST-ZIP | | 6.4 CITY - ST - ZIP | | 2/1/ | |
| 14 haraby partily that the information as well advise | to the fillians along one account of the | Maria | O | | |

I. I 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: Rudy Fre Z

3/5/98 307/665. 7872 Date Daytime Phone #