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 Apr 15 1998 8:00am Secretary of State

DOCUMENT # 1. Corporation Name Sweetwater Creek Homeowners Condominium Assoc Inc				
Deinota a Dia	and Durings	Mailing Address		
Principal Place of Business Mailing Address 560 S. W. 115 AVE				
	_		3. Date incorporated or Qualified	
-> M6.511	WATER, # 1 33174			4. FEI Number Applied For
				7,99,00 7 51
2. Principal I	Place of Business	2a. Mailing Address		CO 75 Additional
	SW115 Ave	26 8299 COLA	1 Way	5. Certificate of Status Desired Fee Required
Suite, Apt	. #, etc.	Suite, Apt. #, etc.		Election Campaign Financing \$5.00 May Be
22 Swe	etwater	27		Trust Fund Contribution
City & Sta	ite	City & State		7. Is this nonprofit corporation a homeowners association?
23 6	Country	28 Mismi	Country	Yes Mo
Zip	Country 25	Zip (30 33155	8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No
24 331	9. Name and Address of Current F	1 <u></u>	<u> 30 </u>	10. Name and Address of New Registered Agent
81 Name Property Management Leevices Jun 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City Miemi FL 85 Zip Code 33555				
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, of bolh, in the State of Eprida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with and agreet the objection 617.0503, Florida Statutes.				
SIGNATURE	Mh Just V	rewood &	re-	3/25/98
12.	Signature, typed or points liamly dinigs, and agent a OFFICERS AND E		 Registered Agent's gualure of 13. 	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE	72/0	☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	GALLANDO, HUg	b	1.2 NAME	
STREET ADDRESS	550 SW 115 AVE		1.3 STREET ADDRESS	
CITY-ST-ZIP	Sweetwater FI	33174	14 CITY - ST - 7IP	
TITLE	VP/D	☐ DELETE	21 TITLE	☐ Change ☐ Addition
NAME	Perdomo, Hector 550 SW 115 AVC	•	2 2 NAME	
STREET ADDRESS			2 3 STREET ADDRESS	
CITY-ST-ZIP	Sweet water, F	33/79 DELETE	2 4 CITY - S1 - ZIP	☐ Change ☐ Addition
TITLE NAME	B/D Proston	. —	3.1 TITLE 3.2 NAME	Change L1 Addition
STREET ADDRESS	GARCIA, ROSA ISAb	~1	3 3 STREET ADDRESS	
City-ST-ZIP	Sweetwater, Fl	33/74	3.4. CITY - ST - ZIP	
TITLE	7/0	DELETE	4 1 TITLE	☐ Change ☐ Addition
NAME	Dolando, LAZAro		4 2 NAME	
STREET ADDRESS	550 S.W. 115 AVE		4 3 STREET ADDRESS	
CITY - \$1 - ZIP	Delgado, Lazaro 550 S.W. 115 Ave Sweet Water, F/ 3	3174	4.4 CITY - \$1 - ZIP	
THILE		DELETE	. 5 1 TITLE	SUDDICE 45 3 DU Glage Addition
NAME			5.2 NAME	-04/15/9801017018
STREET ADDRESS]		5 3 STREET ADDRESS	***61.25
CITY-ST-ZIP			5.4 CITY - ST - 7IP	
TITLE		☐ DELETÉ	6.1 TITLE	Change Addition
NAME			6.2 NAME	, K, I
STREET ADDRESS			6.3 STREET ADDRESS	()~(,)

CITY-ST-ZIP

14. I hereby certify that the information supplied with this filling does not qualify for the exemption stated in Section 119 07(3)(i). Florida Statutes I further certify that the information supplied with this filling does not qualify for the exemption stated in Section 119 07(3)(i). Florida Statutes I further certify that the violent find cated on this annual report or suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that am an officer or director of the corporation or the receiver or respectively that the violent fill 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 BRANKED OFFICE R.O.

4-6-98 (305) 264-48