

FILE NOW: FILING FEE IS \$61.25

FILED

May 19 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 767745 (3)

1. Corporation Name

WOODMONT TRACT 57 HOMEOWNERS ASSOCIATION, INC.

Principal Place of Business

Mailing Address

8725 N.W. 76TH CT.
TAMARAC FL 33321

8725 N.W. 76TH CT.
TAMARAC FL 33321

3. Date Incorporated or Qualified

03/30/1983

4. FEI Number

65-0117808

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

5. Certificate of Status Desired ☐

\$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐

\$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association?

☐ Yes ☐ No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PROVER, LESTER
8725 N.W. 76TH COURT
STE 800
TAMARAC FL 33321

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 title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE **VD** ☐ DELETE
 NAME **PROVER, LESTER**
 STREET ADDRESS **8725 N.W. 76TH CT**
 CITY-ST-ZIP **TAMARAC FL**

1.1 TITLE ☒ Change ☐ Addition
 1.2 NAME **PROVER, LESTER**
 1.3 STREET ADDRESS **8725 N.W. 76 CT**
 1.4 CITY-ST-ZIP **TAMARAC, FL**

TITLE **PD** ☐ DELETE
 NAME **SHELDON, WOLFF**
 STREET ADDRESS **7730 NW 87 AVENUE**
 CITY-ST-ZIP **TAMARAC FL**

2.1 TITLE ☒ Change ☐ Addition
 2.2 NAME **WOLFF, SHALDON**
 2.3 STREET ADDRESS **7730 NW 87 AVENUE**
 2.4 CITY-ST-ZIP **TAMARAC, FL**

TITLE **VD** ☐ DELETE
 NAME **COHN, MARTIN**
 STREET ADDRESS **8530 NW 79 STREET**
 CITY-ST-ZIP **TAMARAC FL**

3.1 TITLE ☐ Change ☐ Addition
 3.2 NAME
 3.3 STREET ADDRESS
 3.4 CITY-ST-ZIP

TITLE **SD** ☒ DELETE
 NAME **ROBERTS, JULIAN**
 STREET ADDRESS **8550 NW 79 STREET**
 CITY-ST-ZIP **TAMARAC FL**

4.1 TITLE ☒ Change ☐ Addition
 4.2 NAME **ROBERTS, JULIAN**
 4.3 STREET ADDRESS **8550 NW 79 STREET**
 4.4 CITY-ST-ZIP **TAMARAC FL**

TITLE **TD** ☐ DELETE
 NAME **ROTHMAN, CHARLES**
 STREET ADDRESS **7626 NW 87 AVENUE**
 CITY-ST-ZIP **TAMARAC FL**

5.1 TITLE ☒ Change ☐ Addition
 5.2 NAME **ROTHMAN, CHARLES**
 5.3 STREET ADDRESS **7626 NW 87 AVENUE**
 5.4 CITY-ST-ZIP **TAMARAC**

TITLE ☐ DELETE
 NAME
 STREET ADDRESS
 CITY-ST-ZIP

6.1 TITLE ☐ Change ☒ Addition
 6.2 NAME **GREENBAUM, CHARLES**
 6.3 STREET ADDRESS **8602 NW 79 STREET**
 6.4 CITY-ST-ZIP **TAMARAC FL**

14. 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:

Charles Rothman TAMARAC FL

4/27/98

8725 N.W. 76TH CT

CR2E037 (1097)