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03-22-1999 90038 019 ****61.25

**NONPROFIT
CORPORATION
ANNUAL REPORT
1999**



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 754320

1. Corporation Name

COSTA DEL SOL RESORT CONDOMINIUM ASSOCIATION, IN

Principal Place of Business

4220 EL MAR DR.
LAUDERDALE-BY-THE-SEA FL 33308

Mailing Address

4220 EL MAR DR.
LAUDERDALE-BY-THE-SEA FL 33308



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

24

25

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

29

30

3. Date Incorporated or Qualified

09/24/1980

4. FEI Number

59-2231432

Applied For

Not Applicable

5. Certificate of Status Desired ☐

\$8.75 Additional
Fee Required

6. Election Campaign Financing
Trust Fund Contribution ☐

\$5.00 May Be
Added to Fees

9. Name and Address of Current Registered Agent

BECKER POLIAKOFF & STREITFELD, P.A.
EMERALD LAKE CORP. PARK
3111 STIRLING ROAD
FT. LAUDERDALE FL 33312-6525

10. Name and Address of New Registered Agent

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

TITLE T/D ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
SORANNO, VITO
14 MOUNT PLEASANT RD.
MORRISTOWN NJ 07960

TITLE VPD ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
GIRARDIN, OMER P.
8069 HENRI BOURASSA ST.
MONTREAL CAN H1E 2Z3

TITLE D ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
SIEBENALER, JOHN C.
246 PORTMAN LN
PITTSBURGH PA

TITLE SD ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
CABLE, BARBARA
3334 HIDDEN HILLS, S.E.
GRAND RAPIDS MI

TITLE P ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
MUCKER, ROBERT A.
2113 CREST VIEW COURT
LAFAYETTE IN

TITLE M ☐ DELETE

NAME
STREET ADDRESS
CITY-ST-ZIP
DUBE, RENE A.
3930 CRYSTAL LAKE DR., #116
POMPANO BEACH FL 33064

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☒ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

5009 Boulevard-St-Jean-Baptiste
Montreal, Quebec Canada H1B 5V3

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☒ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

6.4 CITY-ST-ZIP

4550 N.W.18th Avenue # 210
Pompano Beach, FL 33064

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, with all other like empowered.

SIGNATURE: *[Signature]* **SIGNATURE REQUIRED**

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

03/15/99

Date

(954) 776-6900

Daytime Phone #

0036799

CR2E037-11/98