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Secretary of State

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NONPROFIT CORPORATION ANNUAL REPORT 1999		FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # N07493

1. Corporation Name

KARANDA VILLAGE V CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

 C/O BENCHMARK PROP. MGT.
 7932 WILES RD.
 CORAL SPRINGS FL 33446

Mailing Address

 C/O BENCHMARK PROP. MGT.
 7932 WILES RD.
 CORAL SPRINGS FL 33446


2. Principal Place of Business		2a. Mailing Address		3. Date Incorporated or Qualified	
21 Suite, Apt. #, etc.		26 Suite, Apt. #, etc.		02/05/1985	
22 City & State		27 City & State		4. FEI Number	
23 Zip		28 Zip		59-2502042	
24 Country		29 Country		5. Certificate of Status Desired ☐	
				\$8.75 Additional Fee Required	
				6. Election Campaign Financing ☐	
				\$5.00 May Be Added to Fees	

8. Name and Address of Current Registered Agent

 ZORNIK, JOE
 3437 NW 47TH AVE
 COCONUT CREEK FL 33063

10. Name and Address of New Registered Agent

 81 Name
 ANTHONY GLOMSKI
 82 Street Address (Post Office Number Is Not Acceptable)
 3246 N.W. 47 Ave
 83 City
 Coconut Creek
 84 State
 FL
 85 Zip Code
 33063

11. Pursuant to the provisions of Sections 617.0502 and 617.1608, 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 retreating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	V ☐ DELETE	1.1 TITLE	P ☐ Change ☒ Addition
NAME	SEVRNSKY, WILLIAM	1.2 NAME	ANTHONY GLOMSKI
STREET ADDRESS	3285 NW 47TH AVE	1.3 STREET ADDRESS	3246 N.W. 47th Avenue
CITY-ST-ZIP	COCONUT CREEK FL 33063	1.4 CITY-ST-ZIP	Coconut Creek, FL 33063
TITLE	SD ☒ DELETE	2.1 TITLE	SD ☐ Change ☒ Addition
NAME	KOLMAN, LINDA	2.2 NAME	Jack Backlund
STREET ADDRESS	3224 NW 47TH AVE	2.3 STREET ADDRESS	3242 N.W. 47 Ave
CITY-ST-ZIP	COCONUT CREEK FL 33063	2.4 CITY-ST-ZIP	Coconut Creek, FL 33063
TITLE	TD ☒ DELETE	3.1 TITLE	T/D ☐ Change ☒ Addition
NAME	FERNANDES, STEPHANIE	3.2 NAME	Robert Laney
STREET ADDRESS	3481 NW 47TH AVE	3.3 STREET ADDRESS	3480 NW 47 Avenue
CITY-ST-ZIP	COCONUT CREEK FL 33063	3.4 CITY-ST-ZIP	Coconut Creek, FL 33063
TITLE	D ☒ DELETE	4.1 TITLE	D ☐ Change ☒ Addition
NAME	ARMENO, EUGENE	4.2 NAME	Curt Cuddelack
STREET ADDRESS	3431 NW 47TH AVE	4.3 STREET ADDRESS	3405 N.W. 47 Avenue
CITY-ST-ZIP	COCONUT CREEK FL 33063	4.4 CITY-ST-ZIP	Coconut Creek, FL 33063
TITLE	P ☒ DELETE	5.1 TITLE	
NAME	ZORNIK, JOE	5.2 NAME	
STREET ADDRESS	3437 NW 47 AVE	5.3 STREET ADDRESS	
CITY-ST-ZIP	COCONUT CREEK FL 33063	5.4 CITY-ST-ZIP	
TITLE	☐ DELETE	6.1 TITLE	
NAME		6.2 NAME	
STREET ADDRESS		6.3 STREET ADDRESS	
CITY-ST-ZIP		6.4 CITY-ST-ZIP	

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 817, 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 AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Daytime Phone #

CR2E037 (1/98)