

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # **702504**

(2)

1. Corporation Name

COUNTRY CLUB TERRACE INC



Principal Place of Business

**4836 N.E. 23RD AVENUE
FORT LAUDERDALE FL 33308-4737**

Mailing Address

**4836 N.E. 23RD AVENUE
FORT LAUDERDALE FL 33308-4737**

3. Date Incorporated or Qualified
05/31/1969

3a. Date of Last Report
04/14/1995

2. Principal Place of Business

2a. Mailing Address

21

26

Suite, Apt. #, etc.

Suite, Apt. #, etc.

22

27

City & State

City & State

23

28

Zip

Country

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**PROVENZANO, DOMINIC
4836 NE 23 AVENUE
APT #7
FT. LAUDERDALE FL 33308**

81 Name **FRANK TODARO**

82 Street Address (P.O. Box Number is Not Acceptable)
4836 N.E. 23 AVE.

83 **APT 24**

84 City **Ft. Lauderdale** FL 85 Zip Code **33308**

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

Frank Todaro

FRANK TODARO - PRESIDENT 3/10/96

(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 ☐ DELETE
NAME **VP**
STREET ADDRESS **CARROLL, JAMES**
CITY-ST-ZIP **4836 NE 23 AVENUE #25
FT. LAUDERDALE FL**

1.1 TITLE ☐ Change ☒ Addition
1.2 NAME **PRESIDENT**
1.3 STREET ADDRESS **FRANK TODARO**
1.4 CITY-ST-ZIP **4836 NE 23 AVE #24
FT. LAUDERDALE, FL 33308**

TITLE ☒ DELETE
NAME **P**
STREET ADDRESS **PROVENZANO, DOMINIC**
CITY-ST-ZIP **4836 NE 23 AVE #17
FORT LAUDERDALE FL**

2.1 TITLE ☐ Change ☒ Addition
2.2 NAME **Director**
2.3 STREET ADDRESS **Gloria Hoy**
2.4 CITY-ST-ZIP **4836 NE 23 AVE APT 9
FT LAUDERDALE, FL 33308**

TITLE ☐ DELETE
NAME **TD**
STREET ADDRESS **TODARO, PATRICIA A.**
CITY-ST-ZIP **4836 NE 23RD AVE. #24
FORT LAUDERDALE FL**

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

TITLE ☐ DELETE
NAME **D**
STREET ADDRESS **PETERS, JOANN**
CITY-ST-ZIP **4836 NE 23 AVE #20
FORT LAUDERDALE FL**

4.1 TITLE ☐ Change ☐ Addition
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME **D**
STREET ADDRESS **VANDYKE, JOANN**
CITY-ST-ZIP **4836 NE 23 AVE #31
FORT LAUDERDALE FL**

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

TITLE ☐ DELETE
NAME **SD**
STREET ADDRESS **CAMPBELL, JULIE**
CITY-ST-ZIP **4836 NE 23RD AVE. #7
FORT LAUDERDALE FL**

6.1 TITLE ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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:

Patricia A. Todaro

PATRICIA A. TODARO 3/10/96

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (12/95)