## FILE NOW: FILING FEE IS \$61.25

**NONPROFIT** CORPORATION **ANNUAL REPORT** 



FLORIDA DEPARTMENT OF STATE

**FILED** 

Feb 23 1998 8:00am

Sandra B. Mortham

ANNUAL REPORT  1998		Secretary of State DIVISION OF CORPORATIONS			Secreta	arv of	f State	
pocu	MENT :	# <b>70394</b> 4					J	
	on Name SORRENTO		(-)		ĺ			
VIDE/	OOMILITY	/ IIIV						
Principal Plac		Mailing Address			A NEGLIU ARBIN RONDO UNING UGUN RIBAN N	/101 81011 81011 B1611	I BIORR BIORN BIORR 1481	
2884 N E 33RD COURT FT LAUDERDALE FL 33306 FT LAUDERDALE FL 33306					3	Date Incorporated or Qualified		mun.
					4.	04/25/1962 FEI Number	Lt	Applied For
2. Principal F	Place of Busine	ss	2a. Mailing Address	<del></del>		59-1031949	<u> </u>	Not Applicable 3.75 Additional
Suite, Apt.	# etc		Suite, Apt. #, etc.			Certificate of Status Desired		Fee Required
22	. w, etc.		27 Suite, Apt. #, etc.	<b>¬</b>		Election Campaign Financing Trust Fund Contribution	\$5 	0.00 May Be dded to Fees
City & State City & State					7.	Is this nonprofit corporation a ho	omeowners asso	ociation?
<b>23</b> Zip		Country	<b>28</b>	Country	8.	This corporation owes or has pa	Yes No	
24	2 Nome of		29 3	10		Personal Property Tax due June	30. 🔲 Yes	s 🖾 No
9. Name and Address of Current Registered Agent 81 Nam						. Name and Address of New Re	gistered Agent	i
BALLOW, JAMES W					Address (i	P.O. Box Number Is Not Acceptab	ole)	<del>-</del>
2864 N.E. 33RD CT. FT LAUDERDALE FL 33308							·····	· · · · · ·
ri LAUL	DEMDALE FL	33306		83				
			84 City			FL 85	Zip Code	
11. Pursuant office or r	to the provision	s of Sections 617.0502	and 617.1508, Florida Statutes	, the above-named	d corporation	on submits this statement for the p board of directors. I hereby accep	urpose of chan	ging its registered
	am lamiljar with, Hum			da Statutes. Janes W	/ R - r	low Treasurer 2	2/14/95	2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 - 2 -
SIGNATURE		printed name of registered agent	and title if applicable. (NOTE: F	Registered Agent signature	e required when	n reinstating)	DATE	,
12.	1	OFFICERS AND		13.		ADDITIONS/CHANGES TO OFFIC		
TITLE NAME	i PD Williams,	CHEAN	DELETE	1.1 TITLE	VPD	s D'ANTONIO .	L Ct	hange 🔀 Addition
STREET ADDRESS	2864 NE 3			1.2 NAME 1.3 STREET ADDRESS	2864	4 NF 33 Ad Ct		
CITY-ST-ZIP	FT LAUDE			1.4 CiTY-ST-ZIP	Ft. L	+ N.E. 33 nd Ct auderdale Fl		
TITLE	SD	10-10010	DELETE	2.1 TITLE	-		☐ CH	hange Addition
NAME	WAX, BAR	RY		2.2 NAME	Geo	orge O'Dwyer + NE 3312 C+ Lawlerdale Fl		
STREET ADDRESS	2864 N.E.			2.3 STREET ADDRESS	2864	1-NE 33-12 CT		
CITY-ST-ZIP	FT LAUDE	RDALE FL	DELETÉ	2.4 CITY-ST-ZIP	1++4	Cavaeraare FI	T-160	
TITLE NAME	VPD Swanson	CADI	DELETE	3.1 TITLE			☐ Ch	nange
STREET ADDRESS	2864 NE 3			3.2 NAME 3.3 Street address	ł			
CITY-ST-ZIP	FT LAUDER			3.4. CITY-ST-ZIP				
TITLE	D		☐ DELETE	4.1 TITLE		······································	Ch	nange
NAME	GILLULY, C			4. 2 NAME				
STREET ADORESS	2864 NE 3			4.3 STREET ADDRESS				
CITY-ST-ZIP TITLE	FT LAUDER D	NUALE PL	DELETE	4.4 CITY-ST-ZIP	<del> </del>			nange
NAME	AMYOT, RE	ENE.	otterit	5.1 TITLE 5.2 NAME	]		L Ch	ende Ch vonnou
STREET ADDRESS	2864 NE 3			5.3 STREET ADDRESS	1			
CITY-ST-ZIP	FT LAUDER			5.4 City-St-ZiP	<u></u>			
TITLE	D		<b>⊠</b> DELETE	6.1 TITLE			☐ Ch	ange Addition
NAME	BEMIS, CA		İ	6.2 NAME				
STREET ADDRESS	2864 N.E. (			6.3 STREET ADDRESS				İ
CITY-ST-ZIP	FT LAUDER	WALE FL		6.4 CITY - ST - ZIP	<u> </u>			

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.