FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

1999 DOCUMENT # 716425

· Corporation Name

FERN GARDENS CONDOMINIUM, INC.

FILED Mar 04, 1999 8:00 am § Secretary of State

03-04-1999 90266 038 ****61.25

| Principal Place of Business Mailing Address | | | | | | | | | | |
|---|---|-----------------------------------|---------------------|-------------------|--------------|---|----------------------------|------------|---------------------------------------|--|
| 5041 W OAKLAND PARK BLVD 5041 W OAKLAND PARK BLV LAUDERDALE LAKES FL 33313 LAUDERDALE LAKES FL 3331 | | | | | | | | | | |
| Principal Place of Business 2a. Mailing Address | | | | | | 3. Date Incorporated or Qualifed | | | | |
| 21 | | 26 | | | | 04/22/1969 | | · 1 T. | | |
| Suite, Apt. | #, etc. | Suite, Apt. #, etc. | | | | 4. FEI Number 59-1372762 | Applied For Not Applicable | | | |
| 22 | | City & State | | | | 39 1372702 | ···· | \$8.75 A | | |
| City & State | e | 28 | | | | 5. Certifcate of Status Desired | | Fee Rec | | |
| Zip | Country 25 | Zip 29 | Zip Country | | | 6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees | | | | |
| 24 | 9. Name and Address of Currer | | 1001 | | | 10. Name and Address of New | Registered | l Agent | | |
| | | <u> </u> | | B1 Name | | | | | | |
| HOFF, JOHANNE | | | | 82 Stree | t Addres | Address (P.O. Box Number is Not Acceptable) | | | | |
| 5061 W OAKLAND PK BLVD | | | - | 83 | | | | | | |
| LAUDERDALE LKS FL 33313 | | | | | | | | 11 - | · · · · · · · · · · · · · · · · · · · | |
| | | | | B4 City | | | FI | L 85 Zip C | | |
| SIGNATURE | to the provisions of Sections 617.050 registered agent, or both, in the State of familiar with, and accept the obligation of the Signature, typed or printed name of registered agents. | nt and title if applicable. (NOTE | ヒート | بكرحر | e required v | when reinstating) | DATE FEICERS A | ND DIRECTO | RS IN 12 | |
| 12. | | ID DIRECTORS DELETE | 1.1 Titl | <u> </u> | т_ | ADDITIONS/GITANGES TO C | THOUSAND A | Change | Addition | |
| TITLE | VPB | ₽ Date it | 1.1 III | | 1 3 | OGI W. O'AKLA | ACES | 2 | 7 | |
| NAME | INGBER, LIL 5061 W OAKLAND PK BLVD | | | NEET ADDRES | ه کر ا | 061 W. OAKLA | ~ P ./ | N. BY | 112 | |
| STREET ADDRESS | AUDERDALE LAKES FL 33313 | | | Y-ST-ZIP | 14 | JUDEKDALE LI | 46. F | ?႓៹ѯѯ | 3/3 | |
| CITY-ST-ZIP TITLE | SD | ☐ DELETE | 2.1 TITL | | 1 | | | ☐ Change | ■ Addition | |
| NAME | ACCARINO, ROSE | | 2.2 NA | Æ | 1 | | | | | |
| STREET ADDRESS | SOOL IN CARREST DIV DIVID | | 2.3 STF | REET ADDRES | s | | | • | | |
| CITY-ST-ZIP | LAUDERDALE LKS, FL 00000 | | 2.4 CIT | Y-ST-ZIP | | | | | | |
| TITLE | PD | ☐ DELETE | 3.1 TiTI | Æ | | | • | Change | Addition | |
| NAME | HOFF, JOHANNE | | 3.2 NA | AE | | • | | * | l | |
| STREET ADDRESS | 5061 W OAKLAND PK BLVD | | 3.3 STF | REET ADDRES | s | i e | | | | |
| CITY-ST-ZIP | LAUDERDALE LKS, FL 00000 | | 3.4. CIT | Y-ST-ZIP | | | | | - | |
| TITLE | D | ☐ DELETE | 4.1 TITI | £ | | | | . Change | Addition | |
| NAME | PESING, LOUISE | | 4. 2 NA | ME | | | | • | | |
| STREET ADDRESS | | | 4.3 STF | REET ADDRES | s į | | | • | | |
| CITY-ST-ZIP | LAUDERDALE LAKES FL 33313 | | | Y-ST-ZIP | | | - | ☐ Change | · Addition | |
| TITLE | TD | ☐ DELETE | 5.1 TITI 5.2 NAI | | | | | | | |
| NAME | SCHWARTZ, DORIS | | 1 | ME REET ADDRES | s | | | | | |
| STREET ADDRESS | | , | 1 | Y-ST-ZIP | ~ | | | | | |
| CITY-ST-ZIP | LAUDERDALE LAKES FL 3331 | J DELETE | 6.1 TII | | + | | | Change | Addition | |
| TITLE | | C Deterie | 6.2 NA | | | · . | • | | | |
| NAME STREET ADDRESS | | | | REET ADDRES | s | | | | | |
| STREET ADDRESS | | | | Y-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 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: KOS F / FCC ARVING- RY 64

o, Seeter.

183-1253

KZEU3/ (11/98)