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Apr 09 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 719944 (1)

1. Corporation Name

THE WOODLANDS SECTION SEVEN ASSOCIATION, INC.

Principal Place of Business

Mailing Address

7061 W. COMMERCIAL BLVD.
SE
TAMARAC FL 33319
US

7061 W. COMMERCIAL BLVD.
SUITE 5-E
TAMARAC FL 33319
US

3. Date Incorporated or Qualified

12/28/1970

4. FEI Number

59-2235415

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 8051 W. McNAB RD

26 8051 W. McNAB RD

22 Suite, Apt. #, etc.

27 Suite, Apt. #, etc.

23 City & State TAMARAC, FL

28 City & State TAMARAC, FL

24 Zip 33321 25 Country USA

29 Zip 33321 30 Country USA

5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required

6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees

7. Is this nonprofit corporation a homeowners association? ☐ Yes ☐ No

8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. ☐ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

W.H.O.A. ADMINISTRATOR
HERBERT A. KOSTERN
7061 W. COMMERCIAL BLVD.
TAMARAC FL 33319

81 Name Ambassador Community Mgmt, Inc
82 Street Address (P.O. Box Number is Not Acceptable) 8051 W. McNAB RD
83
84 City TAMARAC FL 85 Zip Code 33321

11. Pursuant to the provisions of Sections 617.0532 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

Bruce R. Gran

Bruce R. Gran

3/30/98

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 ☐ Change ☐ Addition

TITLE PD
NAME BLANK, HARRY
STREET ADDRESS 5701 MULBERRY DR
CITY-ST-ZIP TAMARAC FL

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

TITLE TD
NAME SACHS, SHELDON
STREET ADDRESS 5606 MULBERRY DR.
CITY-ST-ZIP TAMARAC FL

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

TITLE SD
NAME KATZ, YETTA
STREET ADDRESS 5607 MULBERRY
CITY-ST-ZIP TAMARAC FL

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

TITLE D
NAME EPSTEIN, HAROLD
STREET ADDRESS 5706 MULBERRY DR.
CITY-ST-ZIP TAMARAC FL

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

TITLE D
NAME KOSTERN, HERBERT
STREET ADDRESS 5504 RED OAK CIRCLE
CITY-ST-ZIP TAMARAC FL

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

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
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 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE: *Sheldon Sachs*

4/1/98

1954-184-8533

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