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FILED

Feb 25 1997 8:00am  
Secretary of StateNONPROFIT  
CORPORATION  
ANNUAL REPORT  
1997FLORIDA DEPARTMENT OF STATE  
Sandra B. Mortham  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # 723254 (9)

1. Corporation Name

NARANJA LAKES CONDOMINIUM NO. THREE, INC.

Principal Place of Business

27500 S.W. 145 AVE.  
NARANJA LAKES FL 33032

Mailing Address

5201 BLUE LAGOON DR  
SUITE 100  
MIAMI FL 33126-2065  
US

2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City &amp; State

23 Zip

Country

24

25

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City &amp; State

28 Zip

Country

29

30

9. Name and Address of Current Registered Agent

ROGEL, DAVID  
BECKER & POLIAKOFF PA  
5201 BLUE LAGOON DR SUITE 100  
MIAMI FL 33126

3. Date Incorporated or Qualified

04/24/1972

3a. Date of Last Report

06/25/1996

4. FEI Number

59-1608733

Applied For

Not Applicable

5. Certificate of Status Desired

☐\$8.75 Additional  
Fee Required6. Election Campaign Financing  
Trust Fund Contribution☐\$5.00 May Be  
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,  
Florida Statutes☐ Yes☐ No

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

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

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

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE PD ☐ DELETE  
NAME ARCHER, STUART H  
STREET ADDRESS 7340 S.W. 132ND STREET  
CITY - ST - ZIP MIAMI FL 33156TITLE VPD ☐ DELETE  
NAME JONES, CLIFFORD  
STREET ADDRESS 113 GLENDOVER CIRCLE  
CITY - ST - ZIP SUN CITY CENTER FL 33573TITLE TD ☐ DELETE  
NAME TOOTHMAN, ROBERT  
STREET ADDRESS 7684 CONCORD DRIVE  
CITY - ST - ZIP BOULDER CO 80301TITLE SO ☐ DELETE  
NAME ESKAU, THOMAS  
STREET ADDRESS 19800 S.W. 180 AVE., LOT 251  
CITY - ST - ZIP MIAMI FL 33187TITLE ASTO ☐ DELETE  
NAME ARCHIBALD, JOHN  
STREET ADDRESS 6032 INDRIO ROAD P2  
CITY - ST - ZIP FORT PIERCE FL 34951TITLE ☐ DELETE  
NAME  
STREET ADDRESS  
CITY - ST - ZIP

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

11 TITLE ☐ Change ☐ Addition

12 NAME

13 STREET ADDRESS

14 CITY - ST - ZIP

21 TITLE ☐ Change ☐ Addition

22 NAME

23 STREET ADDRESS

24 CITY - ST - ZIP

31 TITLE ☐ Change ☐ Addition

32 NAME

33 STREET ADDRESS

34 CITY - ST - ZIP

41 TITLE ☐ Change ☐ Addition

42 NAME

43 STREET ADDRESS

44 CITY - ST - ZIP

51 TITLE ☐ Change ☐ Addition

52 NAME

53 STREET ADDRESS

54 CITY - ST - ZIP

61 TITLE ☐ Change ☐ Addition

62 NAME

63 STREET ADDRESS

64 CITY - ST - ZIP

14. I do 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:

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

13 FEB 97

305-238-0911

CR2E037 (9/96)