FILE NOW: FILING FEE IS $61.25

FILED
May 14 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT
1998

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

DOCUMENT # 725772 (8)

1. Corporation Name

PARK SIDE MANOR "A" CONDOMINIUM, INC.

Principal Place of Business	Mailing Address
170 SW 11TH AVE. BLDG. A. APT. 6 HALLANDALE FL 33009 US	170 SW 11TH AVE. BLD.A-APT.6 HALLANDALE FL 33009 US

2. Principal Place of Business 21	2a. Mailing Address 26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip / Country 24 / 25	Zip / Country 29 / 30

3. Date Incorporated or Qualified: 03/08/1973

4. FEI Number: 59-1086648 ☐ Applied For ☐ Not Applicable

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

GANNIM, SHARIFF
170 S.W. 11TH AVENUE, APT. 6
HALLANDALE FL 33009

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P	☒ DELETE	1.1 TITLE	P	☐ Change ☒ Addition
NAME	GATH, LEONARD		1.2 NAME	FITZGIBBONS, CHARLES	
STREET ADDRESS	170 S.W. 11TH AVENUE, APT 5		1.3 STREET ADDRESS	170 SW 11th AVE APT #11	
CITY-ST-ZIP	HALLANDALE FL		1.4 CITY-ST-ZIP	HALLANDALE, FL 33009	
TITLE	TSD	☐ DELETE	2.1 TITLE	V	☐ Change ☒ Addition
NAME	SHARIFF, GANNIM		2.2 NAME	MARINO, LUCY	
STREET ADDRESS	170 S.W. 11TH AVENUE,APT. 6		2.3 STREET ADDRESS	170 SW 11th AVE APT #10	
CITY-ST-ZIP	HALLANDALE FL		2.4 CITY-ST-ZIP	HALLANDALE, FL 33009	
TITLE	D	☒ DELETE	3.1 TITLE	D	☐ Change ☒ Addition
NAME	BRUSCELLA, MARGARET		3.2 NAME	GATH, LEONARD	
STREET ADDRESS	170 S.W. 11TH AVENUE, #18		3.3 STREET ADDRESS	170 SW 11th AVE APT #5	
CITY-ST-ZIP	HALLANDALE FL		3.4 CITY-ST-ZIP	HALLANDALE, FL 33009	
TITLE	D	☐ DELETE	4.1 TITLE	D	☐ Change ☒ Addition
NAME	BRUNO, EARL		4.2 NAME	DALLAJACONO, MARGARET	
STREET ADDRESS	170 S.W. 11TH AVENUE, APT.3		4.3 STREET ADDRESS	170 SW 11th AVE APT #8	
CITY-ST-ZIP	HALLANDALE FL		4.4 CITY-ST-ZIP	HALLANDALE, FL 33009	
TITLE	D	☐ DELETE	5.1 TITLE	D	☐ Change ☒ Addition
NAME	BALBO, JOE		5.2 NAME	FITZGIBBONS, ANNALEE	
STREET ADDRESS	170 S.W. 11TH AVENUE		5.3 STREET ADDRESS	170 SW 11th AVE APT #11	
CITY-ST-ZIP	HALLANDALE FL		5.4 CITY-ST-ZIP	HALLANDALE, FL 33009	
TITLE		☐ DELETE	6.1 TITLE	D	☐ Change ☒ Addition
NAME			6.2 NAME	UPLINGER, CHARLES	
STREET ADDRESS			6.3 STREET ADDRESS	170 SW 11th AVE APT #20	
CITY-ST-ZIP			6.4 CITY-ST-ZIP	HALLANDALE, FL 33009	

CR2E037 (10/97)

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: _____ Date: 05/05/98