FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAY -1 AM 1:20

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 725818

1. Corporation Name: TOPAZ NORTH CONDOMINIUM ASSOC., INC.

Principal Place of Business	Mailing Address
4050 N.W. 4TH AVE. LAUDERDALE LAKES, FL 33319	SAME

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 3/17/73	3a. Date of Last Report
2. Principal Place of Business (21)	2a. Mailing Address (26)
4. FEI Number: 65-0146128	☐ Applied For ☐ Not Applicable
Suite, Apt. #, etc. (22)	Suite, Apt. #, etc. (27)
5. Certificate of Status Desired ☐ NON PROFIT	$8.75 Additional Fee Required
City & State (23)	City & State (28)
6. Election Campaign Financing Trust Fund Contribution ☐	$5.00 May Be Added to Fees
Zip (24) / Country (25)	Zip (29) / Country (30)
8. This corporation has liability for intangible tax under S. 199.032 Florida Statutes ☐ Yes ☒ No	

9. Name and Address of Current Registered Agent

EVA TOTARO
4050 N.W. 4TH AVE
LAUDERDALE LAKES, FL 33319

10. Name and Address of New Registered Agent

81 Name: ORLANDO FURKO
82 Street Address (P.O. Box Number is Not Acceptable): 4050 N.W. 4TH AVE.
83
84 City: LAUDERDALE LAKES FL 85 Zip Code: 33319

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: ✓ Orlando E. Furko — ✓ 4-13-95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) — DATE

12. OFFICERS AND DIRECTORS	13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
TITLE D NAME O. ORLANDO FURKO STREET ADDRESS 4050 N.W. 4TH AVE. CITY ST ZIP LAUDERDALE LAKES FL 33319	11 TITLE 12 NAME 13 STREET ADDRESS 14 CITY ST ZIP ☐ Change ☐ Addition
TITLE D NAME S. VIOLA GOTELKIN STREET ADDRESS 4050 N.W. 4TH AVE CITY ST ZIP LAUDERDALE LAKES FL 33319	21 TITLE 22 NAME 23 STREET ADDRESS 24 CITY ST ZIP ☐ Change ☐ Addition 400001504234 -05/02/95--01020--015 ****130.00 ****130.00
TITLE D NAME V. P. LOUIS ARTONE STREET ADDRESS 4050 N.W. 4TH AVE. CITY ST ZIP LAUDERDALE LAKES FL 33319	31 TITLE 32 NAME 33 STREET ADDRESS 34 CITY ST ZIP ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	41 TITLE 42 NAME 43 STREET ADDRESS 44 CITY ST ZIP ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	51 TITLE 52 NAME 53 STREET ADDRESS 54 CITY ST ZIP ☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY ST ZIP	61 TITLE 62 NAME 63 STREET ADDRESS 64 CITY ST ZIP ☐ Change ☐ Addition REMITTED BY MAY 1 CH

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed or added to the report with an address.

SIGNATURE: ✓ Orlando E. Furko — ✓ 4-13-95
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #