FILE NOW: FILING FEE IS $61.25

NONPROFIT CORPORATION ANNUAL REPORT

1996

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

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DOCUMENT # 725818 (9)

1. Corporation Name

TOPAZ NORTH CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business	Mailing Address
4050 NW 42 AVENUE LAUDERDALE LAKES FL 33319	4050 NW 42 AVENUE LAUDERDALE LAKES FL 33319

3. Date Incorporated or Qualified: 03/15/1973
3a. Date of Last Report: 05/01/1995

2. Principal Place of Business
21 c/o CMS
22 Suite, Apt. #, etc. D
23 City & State: FORT LAUDERDALE FL
24 Zip: 33319
25 Country: BROWARD

2a. Mailing Address
26 5310 N. STATE RD 7
27 Suite, Apt. #, etc.
28 City & State
29 Zip
30 Country

4. FEI Number: 59-1564614 ☐ 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

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No

9. Name and Address of Current Registered Agent

FURLO, ORLANDO
4090 N.W. 42ND AVENUE
LAUDERDALE LAKES FL 33319

10. Name and Address of New Registered Agent

81 Name: ALAN R. COHEN
82 Street Address (P.O. Box Number is Not Acceptable): c/o CMS 5310 N. STATE RD 7
83 SUITE D
84 City: FORT LAUDERDALE FL 85 Zip Code: 33319

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: Alan R. Cohen 4/28/96
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	P FURLO, ORLANDO 4090 N.W. 42 AVE. LAUDERDALE LAKES FL 33319	☒ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	P LAFTER, CLAIRE 4090 NW 42 AVE APT 216 LAUDERDALE LAKES, FL 33319	☒ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S GORELKIN, VIOLA 4050 N.W. 42 AVE. LAUDERDALE LAKES FL 33319	☒ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	S BROWN, LORRAINE 4090 NW 42 AVE. APT LAUDERDALE LAKES, FL 33319	☒ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VP ARSTONE, LOUIS 4050 N.W. 42 AVE. LAUDERDALE LAKES FL 33319	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD TOTARO, EVA 4090 NW 42 AVE LAUDERDALE LAKES FL	☒ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP	D CAPOBIANCO, PASQUALE 4050NW 42 AVE. APT 321 LAUDERDALE LAKES, FL 33319	☒ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	D DUNN, ROSE 4050 NW 42 AVE APT 417 LAUDERDALE LAKES, FL 33319	☒ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP		☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP	D McNIEL, TONI 4050 NW 42 AVE. APT. 212 LAUDERDALE LAKES, FL 33319	☒ Change ☒ Addition

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)(k), 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] 4/30/96 777-3828 JR
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

CR2E037 (12/95)