

**FILE NOW: FILING FEE IS \$61.25**

**FILED**  
**Apr 15 1998 8:00am**  
**Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT <b>1998</b>		FLORIDA DEPARTMENT OF STATE <b>Sandra B. Mortham</b> Secretary of State DIVISION OF CORPORATIONS
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**DOCUMENT # 727119 (0)**

1. Corporation Name  
**MANORS TOWNHOUSE CONDOMINIUM ASSOCIATION, INC.**

Principal Place of Business <b>ON, INC. (THE)</b> <b>4162 INVERRARY DRIVE</b> <b>LAUDERHILL FL 33319</b>	Mailing Address <b>ON, INC. (THE)</b> <b>4162 INVERRARY DRIVE</b> <b>LAUDERHILL FL 33319</b>
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3. Date Incorporated or Qualified  
**08/07/1973**

4. FEI Number  
**23-7441076**

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

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24	2a. Mailing Address 25 Suite, Apt. #, etc. 26 City & State 27 Zip 28 Country 29
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9. Name and Address of Current Registered Agent

**CAMPBELL PROPERTY MGMT. & REAL ESTATE, INC**  
**4162 INVERRARY DRIVE**  
**LAUDERHILL FL 33319**

10. Name and Address of New Registered Agent

01 Name	
02 Street Address (P.O. Box Number is Not Acceptable)	
03	
04 City	<b>FL</b> 05 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 \_\_\_\_\_ (NOTE: Registered Agent signature required when reinstating) \_\_\_\_\_ DATE \_\_\_\_\_

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	VP <input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	SILVERMAN, HERBERT	1.2 NAME	
STREET ADDRESS	4184 INVERRARY DRIVE	1.3 STREET ADDRESS	
CITY-ST-ZIP	LAUDERHILL FL	1.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	GIBBS, DEBRA	2.2 NAME	
STREET ADDRESS	4122 INVERRARY DR	2.3 STREET ADDRESS	
CITY-ST-ZIP	LAUDERHILL, FL 00000	2.4 CITY-ST-ZIP	
TITLE	D <input type="checkbox"/> DELETE	3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	OKSNER, HARRY	3.2 NAME	
STREET ADDRESS	4082 INVERRARY DR.	3.3 STREET ADDRESS	
CITY-ST-ZIP	LAUDERHILL, FL 00000	3.4 CITY-ST-ZIP	
TITLE	P <input type="checkbox"/> DELETE	4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TRENK, SEYMOUR	4.2 NAME	
STREET ADDRESS	4128 INVERRARY DR.	4.3 STREET ADDRESS	
CITY-ST-ZIP	LAUDERHILL, FL 00000	4.4 CITY-ST-ZIP	
TITLE	T <input type="checkbox"/> DELETE	5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	TACHER, AL	5.2 NAME	
STREET ADDRESS	4092 INVERRARY DR.	5.3 STREET ADDRESS	
CITY-ST-ZIP	LAUDERHILL, FL 00000	5.4 CITY-ST-ZIP	
TITLE	S <input type="checkbox"/> DELETE	6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
NAME	LABECK, JACKIE	6.2 NAME	
STREET ADDRESS	4044 INVERRARY DR.	6.3 STREET ADDRESS	
CITY-ST-ZIP	LAUDERHILL FL	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: \_\_\_\_\_ **SIGNATURE REQUIRED** 3/10/98

CR2E037 (10/97)