

FILE NOW: FILING FEE AFTER MAY 1 IS \$155.00

CORPORATION
ANNUAL REPORT
1995



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

APPROVED
AND
FILED

1995 MAR 14 AM 8:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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****130.00 ****130.00

DO NOT WRITE IN THIS SPACE

DOCUMENT # 727509 (2)
1. Corporation Name
WESTWOOD 17 CIVIC ASSOCIATION, INC.

Principal Place of Business Mailing Address
6900 N. W. 77 STREET 6900 N. W. 77 STREET
TAMARAC FL 33321 TAMARAC FL 33321

3. Date Incorporated or Qualified 09/20/1973 3a. Date of Last Report 03/08/1994
4. FEI Number 23-7352882 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. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ \$68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☐ No

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

9. Name and Address of Current Registered Agent
•DOUGLAS, WALTER*
7211 NW 76TH STREET
TAMARAC FL 33321

10. Name and Address of New Registered Agent
81 Name DAVID HELMS
82 Street Address (P.O. Box Number is Not Acceptable) 7213 NW 76TH PLACE
83 City TAMARAC FL 85 Zip Code 33321

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 Alice Arnold Alice Arnold March 8, 1995
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS
TITLE VP
NAME COHEN, EDWARD
STREET ADDRESS 7209 NW 77TH STREET
CITY-ST-ZIP TAMARAC FL
TITLE SD
NAME WEAD, DELORES
STREET ADDRESS 7103 NW 77TH STREET
CITY-ST-ZIP TAMARAC FL
TITLE D
NAME SCHWEIGER, SILVIA
STREET ADDRESS 6904 NW 76TH DR
CITY-ST-ZIP TAMARAC FL
TITLE PD
NAME DOUGLAS, WALTER
STREET ADDRESS 7211 NW 76TH PLACE
CITY-ST-ZIP TAMARAC FL
TITLE TD
NAME ARNOLD, ALICE
STREET ADDRESS 7804 N.W. 66TH TERR.
CITY-ST-ZIP TAMARAC FL
TITLE D
NAME LADAU, MILTON
STREET ADDRESS 7814 N.W. 71ST AVE.
CITY-ST-ZIP TAMARAC FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12
1.1 TITLE PD
1.2 NAME DAVID HELMS
1.3 STREET ADDRESS 7213 NW 76TH PLACE
1.4 CITY-ST-ZIP TAMARAC, FL 33321
2.1 TITLE LOIS GARRISON
2.2 NAME 7614 NW 72ND WAY
2.3 STREET ADDRESS TAMARAC, FL.
2.4 CITY-ST-ZIP TAMARAC, FL.
3.1 TITLE SD
3.2 NAME BARBARA LA DOMARSINO
3.3 STREET ADDRESS 6805 NW 77TH ST.
3.4 CITY-ST-ZIP TAMARAC, FL.
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

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 110.07(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: Alice Arnold Alice Arnold Feb 21, 1995 305-7213461
Signature and typed or printed name of signing officer or director (Anytime before)