NONPROFIT CORPORATION ANNUAL REPORT

1999



Mailing Address 100 BAYVIEW DRIVE

NORTH MAMI BEACH FL 33160

FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 727755

Corporation Name

Principal Place of Business

NORTH MIAMI BEACH FL 33160

100 BAYVIEW DRIVE

ARLEN HOUSE EAST CONDOMINIUM ASSOCIATION, INC.

NORTH MIAMI BEACH FL 33160

NORTH MIAMI BEACH FL 33160

NORTH MIAMI BEACH FL 33160

100 BAYVIEW DRIVE #308

100 BAYVIEW DRIVE #1710

FREIDLANDER, MARIANNE

100 BAYVIEW DRIVE #1131

100 BAYVIEW DRIVE # 1703

GAGNON, GASTON

NORTH MIAMI BEACH FL 33160

WEINMAN, KAY

SCHVIMER, ALEX

2. Principal Place of Business 2a. Mailing Address 26 Suite, Apt. #, etc. 5uite, Apt. #, etc. 27 City & State 28						3. Date incorporated or Qualified 10/10/1973 4. FEI Number Applied For 13-2770784 Not Applicable 5. Certificate of Status Desired Se.75-Additional Fee Required					
23 Zip	Country	1	Country	y	·	. = -6. Election Campaign Financing		-\$5.	00 N	lay Bo	
24	25 29 30					Trust Fund Contribution Added to Fee					
9. Name and Address of Current Registered Agent				_	10. Name and Address of New Registered Agent						
			81	1	Name		•			ļ	
FELDMAN, MICHAEL K.				2	Street Add	dress (P.O. Box Number is Not Acceptable)					
NELSON & FELDMAN, P.A.				3							
	1135 KANE CONCOURSE					<u> </u>				<u> </u>	
BAY HARBOR ISLANDS FL				Ţ	City	F	·L	1 · L	Zip Co		
	to the provisions of Sections 617.0502 registered agent, or both, in the State or m familiar with, and accept the obligation	ons of, Section 617.0503, Flo	orida Statute	ss.	ale corporei	rporation submits this statement for the purpose tion's board of directors. I hereby accept the ap	of ch pointr	nanginy ment a	g its regis	agistered stered	
Signature, typed or printed name of registered agent and bits if applicable. (NOTE: Registered					signature requir	ADDITIONS/CHANGES TO OFFICERS	AND	חופדו	ATTE	S IN 12	
12.	OFFICERS AND	DIRECTORS	13.			ADDITIONS CHANGES TO CIT TO LIST		Char		Addition	
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NAME	BLAU, SEYMOUR		1.2 NAMÉ				٠.	•		•	
STREET ADDRESS	ss 100 BAYVIEW DRIVE # 2017			1.3 STREET ADDRESS					•		
CITY-ST-ZIP	MORTH MENTIL DESCRIPTION			1.4 CiTY-ST-ZIP			 7	Char	000	Addition	
TITLE	VP	☐ O€LETE		2.1 TITLE		; ;	. ,		igo.		
NAME	HANLEY, HEATHER		22 NAME	:	ĺ						
STREET ADDRESS	100 BAYVIEW DRIVE #2126		2.3 STREE	ŧτ	ADDRESS	· .	٠.	٠ .		- سپار د	

2.4 CITY-ST-ZIP

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6.4 CITY-ST-ZIP

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4.4 CITY-ST-ZIP

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4. 2 NAME

5.1 TIPLE

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8.1 TITLE

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NORTH MIAM! BEACH FL 33160 I hereby certify that the information supplied with this fiting 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 suppliemental annual report is true and accurate and that my signature shall have the same legal effect as if made under cath; 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 garan attachment with an address, with all other like empowered.

SIGNATURE:

CITY-57-ZIP

STREET ADDRES

STREET ADDRESS

STREET ADDRES

STREET ADDRESS

CITY-ST-ZIP

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CITY-ST-ZIP

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☐ Change Addition

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