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FILED
Apr 13 1998 8:00am
Secretary of State

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



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

DOCUMENT # 728621 (4)
Corporation Name
CLASSIC TOWNE HOUSES CONDOMINIUM WEST, INC.



Principal Place of Business
4946 SHERIDAN STREET
HOLLYWOOD FL 33021

Mailing Address
C/O UNITED COMM MGT CORP
3300 UNIV DRIVE #405
CORAL SPRINGS FL 33065
US

3. Date Incorporated or Qualified

01/04/1974

4. FEI Number

59-1577710

Applied For

Not Applicable

2. Principal Place of Business

21 Suite, Apt. #, etc.

23 City & State

24 Zip

Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip

Country

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

9. Name and Address of Current Registered Agent

UNITED COMMUNITY MGT CORP
3300 UNIV DRIVE #405
CORAL SPRINGS FL 33065

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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

Signature typed or printed name of registered agent and title if applicable

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

VD
BLUM, SARAH
4956 SHERIDAN ST
HOLLYWOOD FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

SD
CHARITON, EULSN
4956 SHERIDAN ST
HOLLYWOOD FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D
PORTNOY, MARIA
5112 SHERIDAN ST
HOLLYWOOD FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

D
GOLDBERG, EDWIN
4920 SHERIDAN ST
HOLLYWOOD FL

☒ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

TD
VALENTINE, DONNA
4944 SHERIDAN ST
HOLLYWOOD FL

☐ DELETE

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP

PD
ARLENE STORFER
4914 SHERIDAN ST
HOLLYWOOD FL

☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP

Ruth Schaffer
4956 Sheridan St.
Hollywood, Fl. 33021

☐ Change ☒ Addition

2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

SD
Ellen Chariton
4936 Sheridan St.
Hollywood, Fl. 33021

☒ Change ☐ Addition

3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

Mary Winter
4956 Sheridan St.
Hollywood, Fl 33021

☐ Change ☒ Addition

4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP

☐ Change ☐ Addition

5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

☐ Change ☐ Addition

6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

☐ Change ☐ Addition

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

CR2E037 (10/97)