729389

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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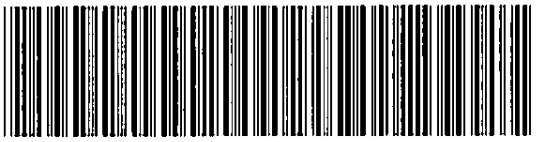

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FILED
Apr 18 8 50 AM '74
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

LIME BAY CONDOMINIUM, INC. NO. 2

Joseph M. Melton
Fort Lauderdale

April 17, 1974

729389

FILED

[illegible] AM '74

[illegible] OF STATE
[illegible] FLORIDA

Leadership Housing Inc.

[illegible] WEST OAKLAND PARK BOULEVARD
[illegible] LAUDERDALE, FLORIDA

April 8, 1974

Secretary of State
The Capitol
Tallahassee, Florida 32304

[illegible] 17 8 - 25700 *****3.00
[illegible] 17 7 - 25600 *****5.00
[illegible] 17 12 - 25500 *****30.00

Re: Lime Bay Condominium, Inc. No. 2, 3 and 4

Dear Sir:

Enclosed herewith, please find two copies of the Articles of Incorporation regarding each of the above, together with three checks in the amount of $38.00 each to cover filing fees, which amount is computed as follows:

Filing Fee	$30.00
Certified Copy	5.00
Prepayment of Resident Agent's Certificate	3.00
	$38.00

Kindly attend to the matter of filing said Articles of Incorporation and return certified copies of each to my attention, and if you have any questions in connection with the above, or with the fee, please call the undersigned collect immediately.

Your cooperation in this matter will be appreciated.

Very truly yours,

LEADERSHIP HOUSING, INC.

[signature]

Joseph M. Melton
Attorney

PRIVILEGE TAX
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FILING
C. COPY
R. A FEE
P. COPY
SEARCH
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#72938

ARTICLES OF INCORPORATION
OF
LIME BAY CONDOMINIUM, INC. NO. 2

FILED

APR 18 8 50 AM '74

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

WE, the undersigned, hereby associate ourselves together for the purpose of forming a non-profit [illegible] of the State of Florida, pursuant to Florida Statutes 617 Et Seq., and hereby certify as follows:

ARTICLE I.

The name of this Corporation shall be:-

LIME BAY CONDOMINIUM, INC. NO. 2

ARTICLE II.

The general purpose of this non-profit Corporation shall be as follows: - To be the "Association" (as defined in the Condominium Act of the State of Florida, F.S. 711 Et Seq.), for the operation of LIME BAY CONDOMINIUM, 6 a Condominium, to be created pursuant to the provisions of the Condominium Act, and as such Association, to operate and administer said Condominium and carry out the functions and duties of said Condominium Association, as set forth in the Declaration of Condominium establishing said Condominium and Exhibits annexed thereto. The Corporation may also be the Association for the operation of additional condominiums which may be created on property adjacent to the above specified Condominium. The Board of Directors shall have the authority in their sole discretion to designate the above Corporation as the Association for such additional condominium(s) and, in such instance(s), the provisions hereafter in these Articles of Incorporation shall be interpreted in such a manner as to include such additional condominium(s).

ARTICLE III.

All persons who are owners of condominium parcels within said Condominium shall automatically be members of this Corporation. Such membership shall automatically terminate when such person is no longer the owner of a condominium parcel. Membership in this Corporation shall be limited to such condominium parcel owners.

Subject to the foregoing, admission to and termination of membership shall be governed by the Declaration of Condominium that shall be filed for said Condominium among the Public Records of Broward County, Florida.

ARTICLE IV.

This Corporation shall have perpetual existence.

ARTICLE V.

The names and residences of the Subscribers to these Articles of Incorporation are as follows:

H. J. Brafman	6000 N. University Drive, Fort Lauderdale, Florida
J. P. Howell	6000 N. University Drive, Fort Lauderdale, Florida
J. M. Melton	6000 N. University Drive, Fort Lauderdale, Florida

ARTICLE VI.

Section 1. The affairs of the Corporation shall be managed and governed by a Board of Directors composed of not less than three (3) nor more than the number specified in the By-Laws. The Directors, subsequent to the first Board of Directors, shall be elected at the annual meeting of the membership, for a term of one (1) year, or until their successors shall be elected and shall qualify. Provisions for such election, and provisions respecting the removal, disqualification and resignation of Directors, and for filling vacancies on the Directorate shall be established by the By-Laws.

Section 2. The principal Officers of the Corporation shall be:

President
Vice President
Secretary
Treasurer

(the last two officers may be combined), who shall be elected from time to time, in the manner set forth in the By-Laws adopted by the Corporation.

ARTICLE VII.

The names of the Officers who are to serve until the first election of Officers, pursuant to the terms of the Declaration of Condominium and By-Laws, are as follows:

H. J. Brafman	President
J. P. Howell	Vice-President
J. M. Melton	Secretary-Treasurer

ARTICLE VIII.

The following persons shall constitute the first Board of Directors, and shall serve until the first election of the Board of Directors at the first regular meeting of the membership.

H. J. Brafman	6000 N. University Drive, Fort Lauderdale, Florida
J. P. Howell	6000 N. University Drive, Fort Lauderdale, Florida
J. M. Melton	6000 N. University Drive, Fort Lauderdale, Florida

ARTICLE IX.

The By-Laws of the Corporation shall initially be made and adopted by its first Board of Directors.

Prior to the time the property described in Article II hereinabove has been submitted to Condominium ownership by the filing of the Declaration of Condominium, said first Board of Directors shall have full power to amend, alter or rescind said By-Laws by a majority vote.

After the property described in Article II hereinabove has been submitted to Condominium ownership by the filing of the Declaration of Condominium, the By-Laws may be amended, altered, supplemented or modified by the membership at the Annual Meeting, or at a duly convened special meeting of the membership attended by a majority of the membership, by vote, as follows:

A. If the proposed change has been approved by the unanimous approval of the Board of Directors, then it shall require only a majority vote of the total membership to be adopted.

B. If the proposed change has not been approved by the unanimous vote of the Board of Directors, then the proposed change must be approved by three-fourths (3/4ths) of the total vote of the membership.

No amendment shall change the rights and privileges of the Developer, Lessor and Management Firm referred to in said Declaration and Exhibits attached thereto without the applicable parties' written approval.

ARTICLE X.

Amendments to these Articles of Incorporation may be proposed by any member or director and shall be adopted in the same manner as is provided for the amendment of the By-Laws as set forth in Article XI above. Said amendment(s) shall be effective when a copy thereof, together with an attached certificate of its approval by the membership, sealed with the Corporate Seal, signed by the Secretary or an Assistant Secretary, and executed and acknowledged by the President or Vice-President, has been filed with the Secretary of State, and all filing fees paid.

ARTICLE XI.

This Corporation shall have all of the powers set forth in Florida Statute 617.021, all of the powers set forth in the Condominium Act of the State of Florida, and all powers granted to it by the Declaration of Condominium and Exhibits annexed thereto.

ARTICLE XII.

There shall be no dividends paid to any of the members, nor shall any part of the income of the corporation be distributed to [illegible] Officers. In the event there are any excess receipts over disbursements, as a result of performing services

such cost as shall be applied against future expenses, etc. The Corporation may pay compensation in a reasonable amount to its members, directors and officers, for services rendered, may confer benefits upon its members in conformity with its purposes, and upon its dissolution or final liquidation, may make distribution to its members as is permitted by the Court having jurisdiction thereof, and no such payment, benefit or distribution shall be deemed to be a dividend or distribution of income.

The Corporation shall issue no shares of stock of any kind or nature whatsoever. Membership in the Corporation and the transfer thereof, as well as the number of members, shall be upon such terms and conditions as provided for in the Declaration of Condominium and By-Laws. The voting rights of the owners of parcels in said Condominium property shall be as set forth in the Declaration of Condominium and/or By-Laws.

IN WITNESS WHEREOF, the Subscribers hereto have hereunto set their hands and seals, this 25th day of November, 1974.

Signed, sealed and delivered in the presence of:

Sonya R. Wilson

Isabel Domash

H. J. Brafman (SEAL)

J. P. Howell (SEAL)

J. M. Melton (SEAL)

STATE OF FLORIDA)
SS:
COUNTY OF BROWARD)

BEFORE ME, the undersigned authority, personally appeared

H. J. Brafman
J. P. Howell
J. M. Melton

who after being by me first duly sworn, acknowledged that they executed the foregoing Articles of Incorporation of LIME BAY CONDOMINIUM, INC. NO. 2, a Florida Corporation not for profit, for the purposes therein expressed.

WITNESS my hand and official seal, at the State and County aforesaid, this 25th day of November, 1974.

Isabel Domash (SEAL)
Notary Public, State of Florida at Large

My Commission expires:

NOTARY PUBLIC, STATE OF FLORIDA AT LARGE
MY COMMISSION EXPIRES JAN. 20, 1977
BONDED BY PROFESSIONAL INSURANCE CO.

CERTIFICATE DESIGNATING PLACE OF BUSINESS OR DOMICILE FOR THE SERVICE OF PROCESS WITHIN THIS STATE, NAMING AGENT UPON WHOM PROCESS MAY BE SERVED.

In pursuance of Chapter 48.091, Florida Statutes, the following is submitted, in compliance with said Act:

First - That LIME BAY CONDOMINIUM, INC. NO. 2 desires to organize under the Laws of the State of Florida with its principal office, as indicated in the articles of incorporation at City of Fort Lauderdale, County of Broward, State of Florida, has named Howard I. Brafman, located at 9600 North University Drive, City of Fort Lauderdale, County of Broward, State of Florida, as its agent to accept service of process within this state.

ACKNOWLEDGMENT: (MUST BE SIGNED BY DESIGNATED AGENT)

Having been named to accept service of process for the above stated corporation, at place designated in this certificate, I hereby accept to act in this capacity, and agree to comply with the provision of said Act relative to keeping open said office.

By _____
(Resident Agent)
H. J. Brafman

STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

CORPORATION ANNUAL REPORT

ANNUAL FILING FEE $5.00

Bruce A. Smathers
Secretary of State

Form COR 820 (4-76)

DO NOT WRITE IN THIS SPACE

READ LETTER AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES

1. NAME AND ADDRESS OF CORPORATION PRINCIPAL OFFICE:

729389 LIME BAY CONDOMINIUM, INC. NO. 2
6000 N. UNIVERSITY DRIVE
FT. LAUDERDALE, FLORIDA

2. ENTER CHANGE OF ADDRESS OF CORPORATION PRINCIPAL OFFICE. P.O. BOX NUMBER ALONE IS NOT SUFFICIENT.

2A STREET ADDRESS

2B CITY

2C STATE | 2D ZIP CODE

3. IS THIS A CLOSE CORPORATION YES [X] NO [ ]

4. DATE INCORPORATED OR QUALIFIED TO DO BUSINESS IN FLORIDA: 04/18/1974

5. FEDERAL EMPLOYER IDENTIFICATION NUMBER (FEIN): 59-1606110

6. STANDARD INDUSTRIAL CLASSIFICATION CODE (SICC):

7. TO AVOID BEING DISSOLVED, YOU MUST PAY A FEE OF $5.00 WITH THIS 1976 REPORT AND AN ADDITIONAL $5.00 FEE FOR EACH YEAR LISTED BELOW FOR WHICH ANNUAL REPORTS APPARENTLY HAVE NOT BEEN FILED.

1975 + 1976

8. NAMES AND STREET ADDRESSES OF EACH OFFICER AND DIRECTOR

8A NAMES OF OFFICERS AND DIRECTORS	8B TITLE	8C DIRECTOR(X)	8D STREET ADDRESS OF EACH OFFICER AND DIRECTOR. (DO NOT USE POST OFFICE BOX NUMBERS)	8E CITY AND STATE
Ray Miller	PRES.	X	6006 N. University Drive	Ft. Lauderdale, Fla.
Donald Fraley	V.P.	X	" " " "	" " "
Edith Evans	SEC.	X	" " " "	" " "
Edith Evans	TREAS.			

9. REGISTERED AGENT INFORMATION

9A NAME: Ray Miller

9B STREET ADDRESS (DO NOT USE POST OFFICE BOX NUMBER): 6006 N. University Dr.

9C CITY: Ft. Lauderdale | 9D STATE: Fla. | 9E ZIP CODE:

10. AN OFFICER OF THE CORPORATION MUST SIGN THIS REPORT

THIS REPORT MUST BE SIGNED BY THE PRESIDENT, VICE PRESIDENT, SECRETARY, TREASURER, OR ASSISTANT SECRETARY..

NO OTHER TITLES WILL BE ACCEPTED. YOUR REPORT WILL BE RETURNED IF IT DOES NOT BEAR AN AUTHORIZED SIGNATURE.

I CERTIFY THAT I AM AN OFFICER OF THE CORPORATION EMPOWERED TO EXECUTE THIS REPORT AS REQUIRED BY CHAPTER 607 F.S. I FURTHER CERTIFY THAT I UNDERSTAND MY SIGNATURE ON THIS REPORT SHALL HAVE THE SAME LEGAL EFFECT AS IF MADE UNDER OTAH.

DO NOT WRITE IN THIS SPACE

8-25-76

10A TYPED NAME OF SIGNING OFFICER	10B TITLE	10C TELEPHONE NUMBER
Donald Fraley	Vice President	305 721-1200

10D SIGNATURE: Donald Fraley

10E DATE: 8/10/76

SEE IMPORTANT DISSOLUTION NOTICE ON OTHER SIDE

STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

Bruce A. Smathers
Secretary of State

Form COR 620

CORPORATION ANNUAL REPORT

1977

THIS REPORT MUST BE ACCOMPANIED BY $5.00

APPROVED AND FILED MAR 21 7 44 AM 1977 FLORIDA DEPT. OF STATE CORPORATIONS DIVISION TALLAHASSEE, FLORIDA

FEB 15 77 1 144 *****5.00

▶ *READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES* ◀

1. Name and Address of Corporation Principal Office:

729389 LIME BAY CONDOMINIUM, INC. NO. 2
6000 N. UNIVERSITY DRIVE
FT. LAUDERDALE, FLA

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient.

Street Address: 6858 W. Atlantic Blvd.
P.O. Box No.:
City: Margate, Fla.
State: Fla.
Zip Code: 33063

3. Date Incorporated or Qualified To Do Business in Florida	4. Federal Employer Identification Number (FEIN)	5. Date of Last Report
04/18/1974	59-1606110	1976

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Director (x)	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
MILLER, RAY	PRES	DIR	6006 N. UNIVERSITY DRIVE	FT LAUDERDALE, FL
FRALEY, DONALD		DIR	6006 N. UNIVERSITY DRIVE	FT LAUDERDALE, FL
EVANS, EDITH		SEC	6006 N. UNIVERSITY DRIVE	FT LAUDERDALE, FL
EVANS, EDITH		DIR	6006 N. UNIVERSITY DRIVE	FT LAUDERDALE, FL
YANK, LOU	PRES.	X	9190 Lime Bay Blvd.	Tamarac, Fla. 33321
MALTZ, PHILIP	V.PRES.	X	9190 Lime Bay Blvd.	Tamarac, Fla. 33321
HELLER, JEROME	SECY & TREAS.		9190 Lime Bay Blvd.	Tamarac, Fla. 33321

7. Registered Agent Information

Name: MILLER, RAY
Street Address (Do NOT Use P.O. Box Number): 6006 N. UNIVERSITY DRIVE
City, State and Zip Code: FT. LAUDERDALE, FL

If you wish to change Registered Agent on this form, enter all new information here ▶

Name: CAMPBELL PROPERTY MANAGEMENT
Street Address (Do NOT Use P.O. Box Number): 6858 W. Atlantic Blvd.
City, State and Zip Code: Margate, Fla. 33063

8. An officer of the Corporation must sign this report. This report must be signed by one of the following: The President, Vice President, Secretary, Assistant Secretary or Treasurer or if the Corporation is in the hands of a receiver or trustee, shall be executed on behalf of the Corporation by the receiver or trustee.

No Other Titles Will Be Accepted, Your Report Will Be Returned If It Does NOT Bear An Authorized Signature.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As If Made Under Oath.

Typed Name of Signing Officer	Title	Telephone Number
LOU YANK	PRES.	
Signature: Lou Yank		Date

THIS REPORT MUST BE ACCOMPANIED BY THE $5 FEE

corp-32

NP # 729389

LIME BAY CONDOMINIUM, INC. NO. 2

(x) New Corporation ( ) Reincorporation ( ) Amendment (§617.02)

Filed: 4-18-74 By:

THE FILING FEE FOR THE 1978 ANNUAL REPORT IS $10.

STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

CORPORATION ANNUAL REPORT
1978

Bruce A. Smathers
Secretary of State

THIS REPORT MUST BE ACCOMPANIED BY A $10 FEE (Form COR 620) 12-1-77

FILED
FEB 3 10 20 AM 1978
FLORIDA DEPT. OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

▶ READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES ◀

1. Name and Address of Corporation Principal Office:

729389 LIME BAY CONDOMINIUM, INC. NO. 2
6858 W. ATLANTIC BLVD
MARGATE, FL. 33063

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient.

Street Address: 3068 N. W. 60th Ave.
P.O. Box No.: FEB 22-78 82000 **** 0.00
City: Sunrise
State: Fla.
Zip Code: 33313

3. Date Incorporated or Qualified To Do Business in Florida	4. Federal Employer Identification Number (FEIN)	5. Date of Last Report
04/18/1974	59-1606110	1977

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Director (x)	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
~~KANK, LOU~~	~~DIR~~		~~9190 LIME BAY BLVD.~~	~~TAMARAC, FL~~
~~WALTZ, PHILIP~~	~~DIR~~		~~9190 LIME BAY BLVD.~~	~~TAMARAC, FL.~~
~~MILLER, JEROME~~	~~SEC~~		~~9190 LIME BAY BLVD~~	~~TAMARAC, FL.~~
LOPATEY, IRVING	Pres.		" " "	" " "
HELLER, JERRY	Vice pres.		" " "	" " "
MEYERSON, DAVE	Sec./Treas.		" " "	" " "

7. Registered Agent Information

Name: CAMPBELL PROPERTY MANAGEMEN
Street Address (Do NOT Use P.O. Box Number): 6859W ATLANTIC BLVD
City, State and Zip Code: MARGATE, FL. 33063

If you wish to change Registered Agent on this form, enter all new information here ▶

Name: Campbell Property Management
Street Address (Do NOT Use P.O. Box Number): 3068 N.W. 60th Ave., Sunrise, Fla.
City, State and Zip Code: Sunrise, Fla. 33313

8. An officer of the Corporation must sign this report. This report must be signed by one of the following: The President, Vice President, Secretary, Assistant Secretary or Treasurer or if the Corporation is in the hands of a receiver or trustee, shall be executed on behalf of the Corporation by the receiver or trustee.

No Other Titles Will Be Accepted, Your Report Will Be Returned If It Does NOT Bear An Authorized Signature.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As If Made Under Oath.

Typed Name of Signing Officer: Irving Lopatey
Title: Pres.
Telephone Number:
Signature: Irving Lopatey
Date: 1/30/78

NOTE: THE FILING FEE FOR THE 1978 ANNUAL REPORT IS $10.

THE FILING FEE FOR THE 1979 ANNUAL REPORT IS $10.

CORPORATION ANNUAL REPORT

STATE OF FLORIDA
DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

1979

THIS REPORT MUST BE ACCOMPANIED BY A $10 FEE

DO NOT WRITE IN THIS SPACE

MAR -7-79 2 1472******10.00

◄ READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES ►

1. Name and Address of Corporation Principal Office:

729389
LIME BAY CONDOMINIUM, INC. NO. 2
3068 N.W. 60TH AVE.
SUNRISE, FL. 33313

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient.

Street Address

P.O. Box No.

City

State | Zip Code

3. Date Incorporated or Qualified To Do Business in Florida: 4/18/1974

4. Federal Employer Identification Number (FEIN): 59-1606110

5. Date of Last Report: 1978

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
LOPATEY, IRVING	PD	9190 LIME BAY BLVD.	TAMARAC, FL
ED FISCHMAN	V	9190 LIME BAY BLVD.	TAMARAC, FL.
HARRY KERSCH	S/T	9190 LIME BAY BLVD	TAMARAC, FL.

FILED
79 MAR 30 AM 11:24
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

7. Registered Agent Information

Name: CAMPBELL PROPERTY MANAGEMENT

Street Address (Do NOT Use P.O. Box Number): 3068 N.W. 60TH AVE.

City, State and Zip Code: SUNRISE, FL 33313

If you wish to change Registered Agent on this form, enter all new information below.

Name

Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

8. **See signature restrictions under instructions on reverse side of this form.**

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.

DO NOT WRITE IN THIS SPACE

Rec 3.30.79

Typed Name of Signing Officer: IRVING LOPATEY | Title: PRESIDENT | Telephone Number: 722-5198

Signature: Irving Lopatey | Date: 1/22/79

(Form COR 620i Rev. 11-05-78) NOTE: THE FILING FEE FOR THE 1979 ANNUAL REPORT IS $10.

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

1980

THIS REPORT MUST BE ACCOMPANIED BY A $10 FEE

DO NOT WRITE IN THIS SPACE

APPROVED
AND
FILED
NOV 8 2 07 PM 1980
DIVISION
FLORIDA

READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES
PLEASE STAPLE CHECK TO ANNUAL REPORT

1. Name and Address of Corporation Principal Office:

729389
LIME BAY CONDOMINIUM, INC. NO. 2
3068 N.W. 60TH AVE.
SUNRISE, FL. 33313

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient.

Street Address

P.O. Box No.

City

State | Zip Code

3. Date Incorporated or Qualified To Do Business in Florida	4. Federal Employer Identification Number (FEIN)	5. Date of Last Report
4/18/1974	59-1606110	1979

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
LOPATEY, IRVING	P/D	9190 LIME BAY BLVD.	TAMARAC, FL
FISCHMAN, ED	V	9190 LIME BAY BLVD.	TAMARAC, FL.
LONDER, HELEN	S	9190 LIME BAY BLVD	TAMARAC, FL.
EPSTEIN, JOE	T	9190 LIME BAY BLVD.	TAMARAC, FL.

7. Registered Agent Information

Name
CAMPBELL PROPERTY MANAGEMENT

Street Address (Do NOT Use P.O. Box Number)
3068 N.W. 60TH AVE.

City, State and Zip Code
SUNRISE, FL 33313

To change the Registered Agent and/or Registered Office a separate statement signed by the new Registered Agent and executed by the President or Vice President of the corporation must be filed with a fee of $3. 5/14/80 25

8. **See signature restrictions under instructions on reverse side of this form.**

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.

Typed Name of Signing Officer	Title	Telephone Number
IRVING LOPATEY	PRESIDENT	722-5198

Signature: Irving Lopatey | Date: 3/28/80

DO NOT WRITE IN THIS SPACE

(Form COR 520) Rev. 11/16/79

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

DO NOT WRITE IN THIS SPACE

CORPORATION ANNUAL REPORT

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

FILED
MAY 6 10 43 AM '81
DEPARTMENT OF STATE
TALLAHASSEE, FLORIDA

1981

THIS REPORT MUST BE ACCOMPANIED BY A $10 FEE

◄ READ NOTICE AND INSTRUCTIONS ON OTHER SIDE BEFORE MAKING ENTRIES ►

PLEASE STAPLE CHECK TO ANNUAL REPORT

1. Name and Address of Corporation Principal Office:

729389
LIME BAY CONDOMINIUM, INC. NO. 2
3060 N.W. 60TH AVE.
SUNRISE, FL. 33313

If above address is incorrect in any way, enter the correct address in Item 2. Including Zip Code.

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone Is NOT Sufficient.

Street Address

P.O. Box No.

City

State Zip Code

3. Date Incorporated or Qualified to Do Business in Florida	4. Federal Employer Identification Number (FEIN)	5. Date of Last Report
8/16/1978	59-1606110	1980

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
LOPATEY, IRVING	P/D	9190 LIME BAY BLVD.	TAMARAC, FL
FISCHMAN, ED	V	9190 LIME BAY BLVD.	TAMARAC, FL.
[illegible], HELEN	S	9190 LIME BAY BLVD	TAMARAC, FL.
HELLER, JERRY [illegible]	T	9190 LIME BAY BLVD.	TAMARAC, FL

7. Registered Agent Information

Name

[illegible]

[illegible]

[illegible] 33313

To change the Registered Agent and/or Registered Office, a separate statement signed by the new Registered Agent and executed by the President or Vice President of the corporation must be filed with a fee of $3.

[illegible] signatory qualifications under instructions on reverse side of this form.

[illegible] the Receiver or Trustee Empowered to Execute This Report as Required by Chapter [illegible] Report Shall Have the Same Legal Effects As If Made Under Oath.

[illegible]	Title	Telephone Number
[illegible]	PRESIDENT	722-0881
		Date
		Feb. 18, 1981

[illegible]

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION ANNUAL REPORT **1982**

George Firestone
Secretary of State

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE
ADDED
AND
FILED
APR 27 8 05 PM 1982

FLORIDA DEPT OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of $10 Required —Make Checks Payable To: *Secretary of State*

1. Name and Address of Corporation Principal Office:

729389
LIME BAY CONDOMINIUM, INC. NO. 2
3068 N.W. 60TH AVE.
SUNRISE, FL. 33313

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient.

Street Address

P.O. Box No

City

State Zip Code

3. Date Incorporated or Qualified To Do Business in Florida	4. Federal Employer Identification Number (FEIN)	5. Date of Last Report
04/18/1974	59-1606310	05/06/1981

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
LOPATEY, IRVING	P/D	9190 LIME BAY BLVD.	TAMARAC, FL
FISCHMAN, ED	V	9190 LIME BAY BLVD.	TAMARAC, FL.
~~LONDER, HELEN~~	~~S~~	~~9190 LIME BAY BLVD~~	~~TAMARAC, FL.~~
~~XXXXXXXXXXXX~~	~~XXXX~~	~~9190 LIME BAY BLVD.~~	~~TAMARAC, FL~~
XXXX			
HELLER, JERRY	Sec/ Treas	9190 Lime Bay Blvd.	Tamarac, Fl.
CONE, HENRY	DIR	" " " "	"
GOLDNER, GEORGE	DIR	" " " "	"
SCHWAB, Lou	DIR	" " " "	"

Registered Agent Information

7. Name and Address of Current Registered Agent

CAMPBELL PROPERTY MANAGEMENT
3068 N.W. 60TH AVE.
SUNRISE, FL 33313

8. Name and Address of New Registered Agent

Name

Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida 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 resolution duly adopted by its board of directors on: _____

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes.

10 *See signature restrictions under instructions on reverse side of this form*

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As If Made Under Oath.

Signature	Date
X Jerry Heller	

Typed Name of Signing Officer	Title	Telephone Number
Jerry Heller	Secy/Treasurer	722-0691

(7/82)(11-81)

DUE DATE ON OR AFTER JANUARY 1 AND ON OR BEFORE JULY 1 OF EACH YEAR

CORPORATION ANNUAL REPORT

1983

George Firestone
Secretary of State

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS

APPROVED
AND
FILED

AUG 1 9 35 AM 1983

FLORIDA DEPT. OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

Read Notice and Instructions on Other Side Before Making Entries
Filing Fee of $10 Required —Make Checks Payable To: *Secretary of State*

1. Name and Address of Corporation Principal Office

729389
LIME BAY CONDOMINIUM, INC. NO. 2
3068 N.W. 60TH AVE.
SUNRISE, FL. 33313

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Address is NOT Sufficient

Street Address

P.O. Box No.

City

State Zip Code

3. Date First Incorporated or Qualified to Do Business in Florida: 04/18/1974

4. Federal Employer Identification Number (FEIN): 59-1606110

5. Date of Last Report: 04/27/1982

6. Names and Street Addresses of Each Officer and Director

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State	
Berliner, Harry	D	9190 LIME BAY BLVD	TAMARAC, FL	0000
CONE, HENRY	D	9190 LIME BAY BLVD	TAMARAC, FL	0000
Wortman, Sid	D	9190 LIME BAY BLVD	TAMARAC, FL	0000
LOPATEY, IRVING	P/D	9190 LIME BAY BLVD	TAMARAC, FL	0000
EDELMAN, Joe	S/T	9190 LIME BAY BLVD	TAMARAC, FL	0000
FISCHMAN, ED	V.P.	9190 LIME BAY BLVD	TAMARAC, FL	0000

Registered Agent Information

7. Name and Address of Current Registered Agent

CAMPBELL PROPERTY MANAGEMENT

3068 N.W. 60TH AVE.

SUNRISE, FL 33313

8. Name and Address of New Registered Agent

Name: PROPERTY MANAGEMENT INC.

Street Address (Do NOT Use P.O. Box Number): 400 South Dixie Highway

City, State and Zip Code: Hallandale, Florida 33009

Pursuant to the provisions of Section 607.034 and 608.437, Florida Statutes, the undersigned corporation organized under the laws of the State of Florida submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

The address of the registered office and the address of the business office of the registered agent, as changed, will be identical.

SIGNATURE _____ DATE _____

Registered Agent Accepting Appointment

$2.00 additional fee required for Registered Agent changes.

See signature instructions and instructions on reverse side of this form.

I hereby certify that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, F.S. and that my name appears above, or on an attachment with an entry showing my title or capacity. I understand that I am signing under oath and that my signature shall have the same legal effect as if made under oath.

Irving Lopatey

Irving Lopatey President

Date: 6-29-83

722-1598

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR

CORPORATION ANNUAL REPORT

1984

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

MAY 16 10 10 AM '84
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

◄ Read Notice and Instructions on Other Side Before Making Entries ►

Filing Fee of $10 Required — Make Checks Payable To: *Secretary of State*

1. Name and Address of Corporation Principal Office

729389
Lime Bay Condominium, Inc. No. 2
9190 Lime Bay Blvd.
Tamarac, Florida 33321

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient

Street Address: 005 9855 5/22/84

P.O. Box No.: 005 9855 5/22/84

City:

State: Zip Code:

3. Date Incorporated or Qualified To Do Business In Florida: 4/18/74

4. Federal Employer Identification Number (FEIN): 59-1606110

5. Date of Last Report: 6/29/83

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1983

Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
Fischman, Ed	P/D	9150 Lime Bay Blvd.	Tamarac, Florida 33321
Cone, Henry	V/D	9151 Lime Bay Blvd.	Tamarac, Florida 33321
Edelman, Joe	S/T	9101 Lime Bay Blvd.	Tamarac, Florida 33321
Favor, Dave	D	9190 Lime Bay Blvd.	Tamarac, Florida 33321
Schuchner, Eve	D	9190 Lime Bay Blvd.	Tamarac, Florida 33321
Weitz, Carl	D	9190 Lime Bay Blvd.	Tamarac, Florida 33321

Registered Agent Information

7. Name and Address of Current Registered Agent

Property Management, Inc.
400 South Dixie Highway
Hallandale, Florida 33009

8. Name and Address of New Registered Agent

Name:

Street Address (Do NOT Use P.O. Box Number):

City, State and Zip Code:

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the undersigned corporation, organized under the laws of the State of Florida 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 resolution duly adopted by its board of directors on: _____

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes. 5-16-84

10. *See signature restrictions under instructions on reverse side of this form*

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607, F.S.
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath

Signature	Date
Edward Fischman	

Typed Name of Signing Officer	Title	Telephone Number
Ed Fischman	President	(305) 722-7415

11. *Should you desire a certificate of status check the box below and include an additional $5.00 with your payment.*

CERTIFICATE OF STATUS DESIRED
$5 Additional fee required for certificates

COR 8/2011 (84)

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR

CORPORATION

ANNUAL REPORT

1985

FLORIDA DEPARTMENT OF STATE

Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of $20 Required — Make Checks Payable To: *Secretary of State*

1. Name and Address of Corporation Principal Office

727389 7
LIME BAY CONDOMINIUM, INC. NO. 2
9150 LIME BAY BLVD.
TAMARAC, FL 33321

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient

Street Address

P.O. Box No.

City

State Zip Code

3. Date Incorporated or Qualified To Do Business in Florida: 04/18/1974

4. Federal Employer Identification Number: 59-1605113

5. Date of Last Report: 05/16/1984

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1984

	Names of Officers and Directors	Title	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	City and State
1	LOPATEY, IRVING	P/D	9153 LIME BAY BLVD	TAMARAC, FL
2	YANK, LOU	V/D	9151 LIME BAY BLVD	TAMARAC, FL
3	HELLER, JEROME	S/T	9151 LIME BAY BLVD	TAMARAC, FL
4	FAVER, DAVE	D	9151 LIME BAY BLVD	TAMARAC, FL
5	RABINOFF, MORTY	D	9151 LIME BAY BLVD	TAMARAC, FL
6	GOLDNER, GEORGE	D	9101 LIME BAY BLVD	TAMARAC, FL

Registered Agent Information

7. Name and Address of Current Registered Agent

PROPERTY MANAGEMENT INC
400 S DIXIE HIGHWAY
HALLANDALE, FL 33009

8. Name and Address of New Registered Agent

Name

Street Address (Do NOT Use P.O. Box Number)

City, State and Zip Code

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, organized under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on ______

I hereby accept the appointment of registered agent. I am familiar with and accept the obligations of Section 607.325 F.S.

SIGNATURE ______ DATE ______
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes.

See signature instructions under instructions on reverse side of this form

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S. I Further Certify That Execution of My Signature On This Report Has The Same Legal Effect As If Made Under Oath. (Officer signing must be listed in Block 6)

Signature: Irving Lopatey

Date: March 12, 1985

Typed Name of Signing Officer: Irving Lopatey

Title: President

Telephone Number: 722-5198

$5 additional fee required for a Certificate of Status

DUE DATE ON OR AFTER JANUARY 1 DELINQUENT AFTER JULY 1 OF EACH YEAR

CORPORATION

ANNUAL REPORT

1986

Secretary of State
DIVISION OF CORPORATIONS

Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of $20 Required – Make Checks Payable To: Secretary of State

1 Name and Address of Corporate Principal Office

729389 7
LIME BAY CONDOMINIUM, INC. NO. 2
9190 LIME BAY BLVD.
TAMARAC, FL 33321

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2 Enter Change of Address of Corporate Principal Office. P.O. Box Number Is Not Sufficient

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3 Date Incorporated or Qualified to Do Business in Florida	4 Federal Employer Identification Number (FEIN)	5 Date of Last Report
04/18/1974	59-1606110	03/21/1985

List Addresses of Each Officer and Director as of December 31, 1985

1 Names of Officers and Directors	2 Title	3 Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4 City and State
LOPATEY, IRVING	P/D	9150 LIME BAY BLVD	TAMARAC, FL
WORTMAN, SID	V/D	9100 LIME BAY BLVD	TAMARAC, FL
HELLER, JEROME	D	9151 LIME BAY BLVD	TAMARAC, FL
LONDER, HELEN	T/D	9100 LIME BAY BLVD	TAMARAC, FL
SHAPIRO, ROSLYN	S/D	9101 LIME BAY BLVD	TAMARAC, FL
CHAIT, HERMAN	D	9150 LIME BAY BLVD	TAMARAC, FL

REGISTERED AGENT INFORMATION

Name and Address of Current Registered Agent

PROPERTY MANAGEMENT INC
400 S DIXIE HIGHWAY
HALLANDALE, FL 33009

8 Name and Address of New Registered Agent

Name 81

Street Address (Do NOT Use P.O. Box Number) 82

City and State 83 FL.

Zip Code 84

Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

The change was authorized by resolution duly adopted by its board of directors on _____

Signature of the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

$3.00 additional fee required for Registered Agent changes.

See signature instructions under instructions on reverse side of this form.

I hereby Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607, F.S.
I Further Certify That I Understand All Signatures On This Report Shall Have the Same Legal Effects As If Made Under Oath.
Officer's name must be listed in Block 6.

Signature _____ Date _____

$5 Additional Fee

APPROVED

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1, 1987.

CORPORATION

ANNUAL REPORT
1987

FLORIDA DEPARTMENT OF STATE
George Firestone
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

1987 AUG -5 AM 10:12

FLORIDA DEPARTMENT OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

Read Notice and Instructions on Other Side Before Making Entries

Filing Fee of $25 Required – Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office:

729389 7
LIME BAY CONDOMINIUM, INC. NO. 2
9190 LIME BAY BLVD.
TAMARAC, FL 33321

If above address is incorrect in any way, enter the correct address in Item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3. Date Incorporated or Qualified To Do Business in Florida: 04/18/1974

4. Federal Employer Identification Number (FEIN): 59-1606110

5. Date of Last Report: 05/21/1986

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1986

Names of Officers and Directors	Title 2	Street Address of Each Officer and Director (Do NOT Use Post Office Box Number) 3	City and State 4 5
~~GORDEY, IRVING~~	~~P/D~~	~~9150 LIME BAY BLVD~~	~~TAMARAC, FL~~
ZIMMET, CHARLES	P/D	9151 Lime Bay Blvd.	Tamarac, FL
~~GERMAN, SID~~	~~V/D~~	~~9100 LIME BAY BLVD.~~	~~TAMARAC, FL~~
LEVINE, HARRY	V/D	9151 Lime Bay Blvd.	Tamarac, FL
~~ELLER, JERRY~~	~~S~~	~~9151 LIME BAY BLVD~~	~~TAMARAC, FL~~
WEGWEISER, JOSEPH	T/D	9150 Lime Bay Blvd.	Tamarac, FL
~~KAUDER, HELEN~~	~~T/D~~	~~9100 LIME BAY BLVD.~~	~~TAMARAC, FL~~
KAUDER, PAUL	D	9100 Lime Bay Blvd.	Tamarac, FL
SHAPIRO, ROSLYN	S/D	9101 LIME BAY BLVD.	TAMARAC, FL
~~SHAFF, NORMAN~~	~~D~~	~~9150 LIME BAY BLVD.~~	~~TAMARAC, FL~~
MOSS, EVELYN	D	9100 Lime Bay Blvd.	Tamarac, FL

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

PROPERTY MANAGEMENT INC
400 S DIXIE HIGHWAY
HALLANDALE, FL 33009

8. Name and Address of New Registered Agent

Name 81: Selective Property Services

Street Address 1 (Do NOT Use P.O. Box Number) 82: 9190 Lime Bay Blvd.

Street Address 2 (Do NOT Use P.O. Box Number) 83:

City and State 84: Tamarac, FL

FL.

Zip Code 85: 33321

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on May 28, 1987

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE: Jamie Malagi (Registered Agent Accepting Appointment) DATE: 7-17-87

$10.00 additional fee required for Registered Agent's change

10. See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607, F.S.
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath.
(Officer Signing) must be listed in Block 6)

Signature: Charles M. Zimmet

Date: 7-17-87

Type or Print Name of Signing Officer: Charles Zimmet

Title: President

Telephone Number: 722-6054

CHECK IF STATUS DESIRED ☐

$5 Additional Fee required for a Certificate of Status

CR2E034 (1/86)

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST.

CORPORATION

ANNUAL REPORT

1988

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

Filing Fee of $25 Required — Make Checks Payable To: Secretary of State

1 Name and Address of Corporation Principal Office

729389
LIME BAY CONDOMINIUM, INC. NO. 2
9190 LIME BAY BLVD.
TAMARAC, FL 33321

If above address is incorrect in any way, enter the correct address in item 2, include Zip Code.

2 Enter Change of Address of Corporation Principal Office. P.O. Box Number Alone is NOT Sufficient.

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3 Date Incorporated or Qualified To Do Business in Florida	4 Federal Employer Identification Number (FEIN)	5 Date of Last Report
04/16/1974	59-1606110	08/05/1987

6 Names and Street Addresses of Each Officer and Director, as of December 31, 1987

Names of Officers and Directors 2	Title 2	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 3	City and State 4
LOPATIN, IRVING	D	9150 LIME BAY BLVD.	TAMARAC, FL
LEVINE, HARRY	V/D	9151 LIME BAY BLVD.	TAMARAC, FL
FISCHMAN, EDWARD	D	9151 LIME BAY BLVD.	TAMARAC, FL
KAUDER, PAUL	P/D	9100 LIME BAY BLVD.	TAMARAC, FL
SHAPIRO, ROSLYN	S/D	9101 LIME BAY BLVD.	TAMARAC, FL
MOSS, EVELYN	T/D	9100 LIME BAY BLVD.	TAMARAC, FL

REGISTERED AGENT INFORMATION

7 Name and Address of Current Registered Agent

SELECTIVE PROPERTY SERVICES

9190 LIME BAY BLVD.

TAMARAC, FL. 33321

8 Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84 FL.

Zip Code 85

9 Pursuant to the provisions of Sections 607.104 and 607.007, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, submits this statement for the purpose of changing its registered office, registered agent, or both, in the State of Florida.
Such change was authorized by resolution duly adopted by its board of directors on _____

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

10 If a foreign corporation, does it transact business in Florida _____

11 See signature restrictions under instructions on reverse side of this form.

I Certify That I Am An Officer or Director of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effects As If Made Under Oath
(Officer or Director signing must be listed in Block 6.)

Signature Paul Kauder Date 4/28/88

Typed Name of Signer (Officer or Director) Title Telephone Number

Paul Kauder President 721-1733

12 To obtain a certificate of status check the box

CERTIFICATE OF STATUS ORDERED

STAMP(S) OR FEE

FILE NOW! ANNUAL REPORT DELINQUENT AFTER JULY 1ST

APPROVED

CORPORATION

ANNUAL REPORT

1989

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

DO NOT WRITE IN THIS SPACE

AND FILED

1989 MAY -9 AM 9:33

FLORIDA DEPT. OF STATE
CORPORATIONS DIVISION
TALLAHASSEE, FLORIDA

Filing Fee of $35 Required — Make Checks Payable To: Secretary of State

1. Name and Address of Corporation Principal Office

ZIP + 4

729389 7
LIME BAY CONDOMINIUM, INC. NO. 2
9190 LIME BAY BLVD.
TAMARAC, FL 33321-8605

If address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2. Enter Change of Address of Corporation Principal Office, P.O. Box Number Alone is NOT Sufficient

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3. Date Incorporated or Qualified To Do Business in Florida	4. Federal Employer Identification Number (FEIN)	5. Date of Last Report
04/18/1974	59-1606110	05/20/1988

6. Names and Street Addresses of Each Officer and Director, as of December 31, 1988

1 Title	2 Names of Officers and Directors	3 Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4 City and State 5
D	Heller, Jerry	9151 LIME BAY BLVD.	TAMARAC, FL
V/D	Wortman, Sidney	9100 LIME BAY BLVD.	TAMARAC, FL
V/D	Cone, Henry	9151 LIME BAY BLVD.	TAMARAC, FL
P/D	Fischman, Edward	9150 LIME BAY BLVD.	TAMARAC, FL
S/D	Weitz, Carl	9100 LIME BAY BLVD.	TAMARAC, FL
T/D	Edelman, Joseph	9101 LIME BAY BLVD.	TAMARAC, FL

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

SELECTIVE PROPERTY SERVICES
9190 LIME BAY BLVD.
TAMARAC, FL. 33321

8. Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84 FL.

Zip Code 85

9. Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on _____

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

10. If a foreign corporation, date first conducted business in Florida _____

See signature restrictions under instructions on reverse side of this form.
I Certify That I Am An Officer or Director of the Corporation, the Receiver or Trustee Empowered to Execute This Report as Required by Chapter 607 F.S.
I Further Certify That I Understand My Signature On This Report Shall Have the Same Legal Effect As If Made Under Oath.
Officer or Director signing must be listed in Block 6.)

Signature Joseph Edelman

Date 5/3/89

Typed Name of Signing Officer or Director Joseph Edelman

Title Treasurer

Telephone Number 726 0572

12. Check for Certificate of Status if Desired

CERTIFICATE OF STATUS DESIRED ☐

CR2E034 (1-89)

FILE NOW! THIS ANNUAL REPORT WILL BE DELINQUENT AFTER JULY 1ST

CORPORATION

ANNUAL REPORT

1990

FILED
FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

AND
FILED

1990 JUN 20 AM 11:41

Filing Fee of $35 Required — Make Checks Payable To: Secretary of State

1 Name and Address of Corporation Principal Office

729389 7

ZIP + 4 PRESORT

LIME BAY CONDOMINIUM, INC. NO. 2
9190 LIME BAY BLVD.
TAMARAC, FL 33321-8605

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2 If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box number alone is NOT sufficient. The NAME of the corporation can be changed only by filing an amendment.

Street Address 21

P.O. Box No. 22

City and State 23

Zip Code 24

3 Date Incorporated or Qualified To Do Business in Florida: 04/18/1974

4 FEI Number: 59-1606110

☐ FEI Number Applied For
☐ FEI Number Not Applicable

6 Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

Title 1	Names of Officers and Directors 2	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 3	City and State 4 5
T/D	LONDER, HELEN	9100 LIME BAY BLVD.	TAMARAC, FL
V/D	WORTMAN, SIDNEY	9100 LIME BAY BLVD.	TAMARAC, FL
V/D	CONE, HENRY	9151 LIME BAY BLVD.	TAMARAC, FL
P/D	FISCHMAN, EDWARD	9150 LIME BAY BLVD.	TAMARAC, FL
S/D	WEITZ, CARL	9100 LIME BAY BLVD.	TAMARAC, FL
V/D	EDELMAN, JOSEPH	9101 LIME BAY BLVD.	TAMARAC, FL

REGISTERED AGENT INFORMATION

7 Name and Address of Current Registered Agent

SELECTIVE PROPERTY SERVICES
9190 LIME BAY BLVD.
TAMARAC, FL. 33321

8 Name and Address of New Registered Agent

Name 81

Street Address 1 (Do NOT Use P.O. Box Number) 82

Street Address 2 (Do NOT Use P.O. Box Number) 83

City and State 84: FL.

Zip Code 85

9 Pursuant to the provisions of Sections 607.034 and 607.037, Florida Statutes, the above-named corporation, incorporated under the laws of the State of Florida, 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 resolution duly adopted by its board of directors on _____

I hereby accept the appointment of registered agent. I am familiar with, and accept the obligations of, Section 607.325 F.S.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

10 I 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 effects as if made under oath; I further certify that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, F.S.

Signature: Edward Fischman Date

Typed Name of Signing Officer or Director: Edward Fischman | Title: President | Telephone Number: 722-7415

11 Should you desire a certificate of status check the box:

CERTIFICATE OF STATUS DESIRED ☐

$5 Certificate Fee

FILE NOW! CORPORATE STATUS WILL BE DELINQUENT AFTER JULY 1ST.

CORPORATION

ANNUAL REPORT

1991

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
FL. DEPT. OF STATE
CORPORATIONS DIV.
TALLAHASSEE, FL.
FILED

FILING FEE OF $61.25 REQUIRED

DO NOT WRITE IN THIS SPACE.

1. Name and Mailing Address of Corporation

DOCUMENT #729389 (7)

ZIP + 4 PRESORT

LIME BAY CONDOMINIUM, INC. NO. 2
9190 LIME BAY BLVD.
TAMARAC, FL 33321-8605

If above address is incorrect in any way, enter the correct address in item 2. Include Zip Code.

2. If Address in Block 1 is incorrect in any way, enter the correct address below. P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment.

21 Street Address

22 P.O. Box No.

23 City and State

24 Zip Code

3. Date Incorporated or Qualified To Do Business in Florida: 04/18/1974

4. FEI Number: 59-1606110

FEI Number Applied For

FEI Number Not Applicable

5. $8.75 [illegible]

CERTIFICATE OF STATUS DESIRED

6. Names and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information.)

Title 1	Names of Officers and Directors 2	Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers) 3	City and State 4
T/D	LONDER, HELEN	9100 LIME BAY BLVD.	TAMARAC, FL
/D	ROSS, JULIE	9100 LIME BAY BLVD.	TAMARAC, FL
V/D	COHE, HENRY	9151 LIME BAY BLVD.	TAMARAC, FL
P/D	FISCHMAN, EDWARD	9150 LIME BAY BLVD.	TAMARAC, FL
S/D	WEITZ, CARL	9100 LIME BAY BLVD.	TAMARAC, FL
V/D	EDELMAN, JOSEPH	9101 LIME BAY BLVD.	TAMARAC, FL

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

SELECTIVE PROPERTY SERVICES
9190 LIME BAY BLVD.
TAMARAC, FL. 33321

8. Name and Address of New Registered Agent

81 Name

82 Street Address 1 (Do NOT Use P.O. Box Number)

83 Street Address 2 (Do NOT Use P.O. Box Number)

84 City FL. 85 Zip Code

9. 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 _____ DATE _____
(Registered Agent Accepting Appointment)

10. I 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; I further certify that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears in Block 6 above or on an attachment with an address.

SIGNATURE X Edward Fischman DATE 6/10/91

Edward Fischman President

Telephone Number Daytime
(305) 722.7415

FILING FEE OF $61.25 REQUIRED—Make Checks Payable To: Secretary of State $8.75 Additional Fee required for a Certificate of Status

FILE NOW! CORPORATE STATUS WILL BE DELINQUENT AFTER JULY 1ST.

CORPORATION

ANNUAL REPORT
1992

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
DIVISION OF CORPORATIONS

APPROVED
SEC. OF STATE

DO NOT WRITE IN THIS SPACE

FILING FEE $61.25 Make Payable To: Secretary of State

1. Name and Mailing Address of Corporation **DOCUMENT #729389 (7)**

PICKUP
LIME BAY CONDOMINIUM, INC. NO. 2
9190 LIME BAY BLVD.
TAMARAC FL 33321-8605

If above address is incorrect in any way, line through the incorrect information and enter correct address in Block 2

2. If Address in Block 1 is incorrect in any way, line through the incorrect information and enter the correct address in the P.O. Box is acceptable. The NAME of the corporation can be changed only by filing an amendment.

21 Mailing Address

22 P.O. Box No.

23 City and State | 24 Zip Code

3. Date Incorporated or Qualified To Do Business in Florida **04/18/1974**

3a. Date of Last Report **06/19/1991**

4. FEI Number **59-1606110**

FEI Number Applied For

FEI Number Not Applicable

5. SEE [illegible]

CERTIFICATE OF STATUS DESIRED

6. Name and Street Addresses of Each Officer and Director (Do not use any correction tape or fluid to cover over incorrect information)

	1 Title	2 Names of Officers and Directors	3 Street Address of Each Officer and Director (Do NOT Use Post Office Box Numbers)	4 City and State
1 1x	T/D /V	LONDER, HELEN	9100 LIME BAY BLVD.	TAMARAC, FL
2 2x	D /S	ROSS, JULIE	9100 LIME BAY BLVD.	TAMARAC, FL
3 3x	/D	CONE, HENRY	9151 LIME BAY BLVD.	TAMARAC, FL
4 4x	P/D	FISCHMAN, EDWARD	9150 LIME BAY BLVD.	TAMARAC, FL
5 5x	/D	LICHTIGER, JOSHUA	9101 LIME BAY BLVD.	TAMARAC, FL
6	V/D	WEGWEISER, JOSEPH	9150 LIME BAY BLVD.	TAMARAC, FL

REGISTERED AGENT INFORMATION

7. Name and Address of Current Registered Agent

SELECTIVE PROPERTY SERVICES
9190 LIME BAY BLVD.
TAMARAC, FL. 33321

8. Name and Address of New Registered Agent

81 Name

82 Street Address 1 (Do NOT Use P.O. Box Number)

83 Street Address 2 (Do NOT Use P.O. Box Number)

84 City FL. | 85 Zip Code

9. Pursuant to the provisions of Section 607.0502 and 607.1508 or 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE _____
(Registered Agent Accepting Appointment)

10. This corporation has liability for intangible tax under S. 199.032, Florida Statutes. Yes ☐ No X (See other side for information on what to file)

11. I hereby 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 607, Florida Statutes; and that my name appears in Block 6 with an address, if applicable, for each position listed.

SIGNATURE Edward Fischman DATE _____

Name and Signature of Officer or Director | Title | Daytime Telephone Number

Edward Fischman | President | 305 722-7415

12. [illegible]

File Now. Filing Fee after May 1 is $225.00

CORPORATION
ANNUAL REPORT
1993

FLORIDA DEPARTMENT OF STATE
Jim Smith
Secretary of State
P.O. Box 6327
Tallahassee, FL 32314

FILED
93 MAY 10 PM 3:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 729389 (7)

1. Current Mailing Address of Corporation

PROGRESSIVE

LIME BAY CONDOMINIUM, INC. NO. 2
9190 LIME BAY BLVD
TAMARAC FL 33321-8605

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/18/1974
3a. Date of Last Report: 07/16/1992

4. FEI Number: 591606110

FILING FEE $700.00

ANNUAL REPORT $61.25 + $138.75 CORPORATION SUPPLEMENTAL FEE
MAKE CHECK PAYABLE TO DEPARTMENT OF STATE

5. Certificate of Status Desired ☐ $8.75

6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ $138.75 Supplemental Fee Not Required

8. This corporation was authorized to do business on January 1, 1980 Florida Statutes ☐ Yes ☐ No

2. Mailing Address
21

2a. Principal Place of Business
26

Suite, Apt. #, etc.
22 27

City & State
23 28

Country 25 | Zip 29 | Country 30
24

9. Name and Address of Current Registered Agent

SELECTIVE PROPERTY SERVICES
9190 LIME BAY BLVD.
TAMARAC FL 33321

10. Name and Address of New Registered Agent

31 Name

32 Street Address (P.O. Box Numbers Are Not Acceptable)

33

34 City: FL | 35 Zip Code | 36 Country

11. I hereby certify that the information indicated on this report or supplemental 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 607, Florida Statutes; and that my name appears in Block 12 or Block 13 with an asterisk (*), or that I am authorized to sign for such officer or director.

DATE

12. OFFICERS AND DIRECTORS

T/V/D
LONDER, HELEN
9100 LIME BAY BLVD.
TAMARAC FL

D/S
ROSS, JULIE
9100 LIME BAY BLVD.
TAMARAC FL

D
CONE, HENRY
9151 LIME BAY BLVD.
TAMARAC FL

P/D
FISCHMAN, EDWARD
9150 LIME BAY BLVD.
TAMARAC FL

D
LICHTIGER, JOSHUA
9101 LIME BAY BLVD
TAMARAC FL

V/D
WEGWEISER, JOSEPH
9150 LIME BAY BLVD
TAMARAC FL

13. OFFICERS AND DIRECTORS CHANGES

P/D

S/T/D

V/D
STORCH, MURRAY
9150 LIME BAY BLVD.
TAMARAC, FL 33321

D
KAUDER, PAUL
9100 LIME BAY BLVD.
TAMARAC, FL 33321

D
BERMAN, SAMUEL
9151 LIME BAY BLVD.
TAMARAC, FL 33321

T/D

SIGNATURE Helen Londer 5-13-93

HELEN LONDER PRESIDENT (305) 722-8600

FILE NOW: FILING FEE AFTER MAY 1 IS $225.00

1994

APPROVED AND FILED

94 JAN 19 AM 10:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT #

729389 (7)

LIME BAY CONDOMINIUM INC. NO 2

9190 LIME BAY BLVD.
TAMARAC FL 33321

Principal Place of Business

9190 LIME BAY BLVD.
TAMARAC FL 33321

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/18/1974

3a. Date of Last Report: 05/18/1993

4. FEI Number: 59-1606110

5. Certificate of Status Desired: $8.75

7. Supplemental Fee

$5.00 May Be Added to Fees

21 | 2a. Principal Place of Business | 26

22 | Suite, Apt. #, etc. | 27

23 | City & State | 28

24 | 25 | Zip 29 | Country 30

9. Name and Address of Current Registered Agent

SELECTIVE PROPERTY SERVICES
9190 LIME BAY BLVD.
TAMARAC FL 33321

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

DATE

13. CHANGES TO OFFICERS AND DIRECTORS

Current Officers and Directors	Changes
D/P LONDER, HELEN 9100 LIME BAY BLVD. TAMARAC FL	SAME
S/T/D ROSS, JULIE 9100 LIME BAY BLVD. TAMARAC FL	S/D DORF, PHILIP 9150 LIME BAY BLVD TAMARAC, FL 33321
V/D STORCH MURRAY 9150 LIME BAY BLVD TAMARAC FL	V/D REITMAN, MORRIS 9150 LIME BAY BLVD TAMARAC, FL 33321
D KAUDER PAUL 9100 LIME BAY BLVD TAMARAC FL	SAME
D BERMAN SAMUEL 9151 LIME BAY BLVD TAMARAC FL	SAME
T/D WEGWEISER, JOSEPH 9150 LIME BAY BLVD TAMARAC FL	T/D STORCH, MURRAY 9150 LIME BAY BLVD TAMARAC, FL 333321

SIGNATURE: Helen Londer Helen Londer 1-13-94 305-721-8600

SECOND NOTICE: CORPORATION WILL BE DISSOLVED ON OR AFTER AUGUST 6, 1995.
AMOUNT DUE ON OR BEFORE 8/5/95: $196 IF REINSTATED, MINIMUM AMOUNT DUE TO REINSTATE: $500

NONPROFIT CORPORATION ANNUAL REPORT

1995

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

APPROVED AND FILED
1995 JUN 20 PM 4:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 729389 (7)

Corporation Name

LIME BAY CONDOMINIUM INC. NO. 2

Principal Place of Business	Mailing Address
9190 LIME BAY BLVD. TAMARAC FL 33321	9190 LIME BAY BLVD. TAMARAC FL 33321

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 04/18/1974	3a. Date of Last Report: 01/19/1994
4. FEI Number: 59-1606110	☐ 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 ☐	FILING FEE IS $61.25
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	28
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 26
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

SELECTIVE PROPERTY SERVICES
9190 LIME BAY BLVD.
TAMARAC FL 33321

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 _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (F.O.T.: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS-CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	DP	11 TITLE	VP/T	☒ Change ☐ Addition
NAME	LONDER, HELEN	12 NAME		
STREET ADDRESS	9100 LIME BAY BLVD.	13 STREET ADDRESS		
CITY-ST-ZIP	TAMARAC FL	14 CITY-ST-ZIP		
TITLE	SD	21 TITLE	S/D	☒ Change ☐ Addition
NAME	DORF, PHILIP	22 NAME	POSKOSH, LINDA	
STREET ADDRESS	9150 LIME BAY BLVD	23 STREET ADDRESS	9101 LIME BAY BLVD.	
CITY-ST-ZIP	TAMARAC FL	24 CITY-ST-ZIP	~~TAMARAC, FL 33321~~	
TITLE	VD	31 TITLE	P/D	☒ Change ☐ Addition
NAME	REITMAN, MORRIS	32 NAME		
STREET ADDRESS	9150 LIME BAY BLVD	33 STREET ADDRESS		
CITY-ST-ZIP	TAMARAC FL	34 CITY-ST-ZIP		
TITLE	D	41 TITLE		☐ Change ☐ Addition
NAME	KAUDER, PAUL	42 NAME		
STREET ADDRESS	9100 LIME BAY BLVD	43 STREET ADDRESS		
CITY-ST-ZIP	TAMARAC FL	44 CITY-ST-ZIP		
TITLE	D	51 TITLE	D	☒ Change ☐ Addition
NAME	BERMAN, SAMUEL	52 NAME	RING, JOHN	
STREET ADDRESS	9151 LIME BAY BLVD	53 STREET ADDRESS	9100 LIME BAY BLVD.	
CITY-ST-ZIP	TAMARAC FL	54 CITY-ST-ZIP	~~TAMARAC, FL 33321~~	
TITLE	TD	61 TITLE		☒ Change ☐ Addition
NAME	STORCH, MURRAY	62 NAME		
STREET ADDRESS	9150 LIME BAY BLVD	63 STREET ADDRESS	NO LONGER ON THE BOARD	
CITY-ST-ZIP	TAMARAC FL	64 CITY-ST-ZIP		

CR2E037 (3/95)

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)(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: Helen Londer HELEN LONDER TREA 6-15-95 722-2657
SIGNATURE AND TYPED OR PRINTED NAME OF INDIVIDUAL AUTHORIZED OFFICER OR DIRECTOR — Date — Daytime Phone #