

FILE NOW: FILING FEE IS \$61.25

FILED

Jan 26, 1999 8:00am
Secretary of State

01-26-1999 90041 019 *****61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1999



FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 729525

1. Corporation Name

THE MARIPOSA CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

2001 S. SURF RD
HOLLYWOOD FL 33019

Mailing Address

2001 S. SURF RD
HOLLYWOOD FL 33019



2. Principal Place of Business

21

Suite, Apt. #, etc.

22

City & State

23

Zip

Country

2a. Mailing Address

26

Suite, Apt. #, etc.

27

City & State

28

Zip

Country

24

25

29

30

9. Name and Address of Current Registered Agent

RABEN, RICHARD
2130 HOLLYWOOD BLVD.
HOLLYWOOD FL 33020

3. Date Incorporated or Qualified

05/01/1974

4. FEI Number

98-0031908

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

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 D ☐ DELETE

NAME MILLER, CHARLES

STREET ADDRESS 2001 S. SURF RD., #2B

CITY-ST-ZIP HOLLYWOOD FL

TITLE D ☐ DELETE

NAME IAMARINO, DOROTHY

STREET ADDRESS 2001 S. SURF RD., #7A

CITY-ST-ZIP HOLLYWOOD FL

TITLE P ☐ DELETE

NAME ROSENFIELD, ROBERTA

STREET ADDRESS 2001 S. SURF RD., #1B

CITY-ST-ZIP HOLLYWOOD FL

TITLE P ☐ DELETE

NAME CALDERONE, GUS

STREET ADDRESS 2001 S SURF RD APT 4C

CITY-ST-ZIP HOLLYWOOD FL

TITLE D ☐ DELETE

NAME TOMASSO, FLORENCE D

STREET ADDRESS 2001 S. SURF RD., #4E

CITY-ST-ZIP HOLLYWOOD FL

TITLE D ☐ DELETE

NAME VANDERMAY, WILLIAM

STREET ADDRESS 2001 S. SURF RD

CITY-ST-ZIP HOLLYWOOD FL

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE ☐ Change ☐ Addition

1.2 NAME

1.3 STREET ADDRESS

1.4 CITY-ST-ZIP

2.1 TITLE ☐ Change ☐ Addition

2.2 NAME

2.3 STREET ADDRESS

2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition

3.2 NAME

3.3 STREET ADDRESS

3.4 CITY-ST-ZIP

4.1 TITLE ☐ Change ☐ Addition

4.2 NAME

4.3 STREET ADDRESS

4.4 CITY-ST-ZIP

5.1 TITLE ☐ Change ☐ Addition

5.2 NAME

5.3 STREET ADDRESS

5.4 CITY-ST-ZIP

6.1 TITLE ☐ Change ☐ Addition

6.2 NAME

6.3 STREET ADDRESS

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, with all other like empowered.

SIGNATURE: X *[Signature]* SIGNATURE REQUIRED
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

1-9-99 954-922-3913
Date Daytime Phone #

CR2E037 (1/98)