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FILED
Jan 27 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **733439** (4)

1. Corporation Name

TOWNHOUSE VILLAGE AT BONAVENTURE 40 EAST CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

Mailing Address

11530 ST RD 84
DAVIE FL 33325
US

PO BOX 551390
DAVIE FL 33325
US

3. Date Incorporated or Qualified

07/31/1975

4. FEI Number

59-1804290

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. 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

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

23 City & State

27 City & State

24 Zip

25 Country

28 Zip

30 Country

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**POLIAKOFF, GARY A.
3111 STIRLING RD.
FT. LAUDERDALE FL 33312-3525**

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

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

TITLE	VP	<input type="checkbox"/> DELETE
NAME	PUCKETT, CHARLES	
STREET ADDRESS	291 FERN DR	
CITY-ST-ZIP	FT. LAUDERDALE FL	

1.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	WESTON, FL 33326

TITLE	SD	<input type="checkbox"/> DELETE
NAME	GOLDSTONE, RUTH	
STREET ADDRESS	361 FERN DR	
CITY-ST-ZIP	FT LAUDERDALE FL	

2.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	WESTON, FL 33326

TITLE	TD	<input type="checkbox"/> DELETE
NAME	O'CONNER, ABBY	
STREET ADDRESS	394 FERN DR	
CITY-ST-ZIP	FT LAUDERDALE FL	

3.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	
3.3 STREET ADDRESS	
3.4 CITY-ST-ZIP	WESTON, FL 33326

TITLE	P	<input type="checkbox"/> DELETE
NAME	EPSTEIN, PAUL	
STREET ADDRESS	350 FERN DR	
CITY-ST-ZIP	FT LAUDERDALE FL	

4.1 TITLE	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	WESTON, FL 33326

TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	LUIS, DEBS	
STREET ADDRESS	354 FERN DR	
CITY-ST-ZIP	FT LAUDERDALE FL	

5.1 TITLE	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	DUNN, MICHELE
5.3 STREET ADDRESS	295 FERN DRIVE
5.4 CITY-ST-ZIP	WESTON, FL 33326

TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> 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 in an attachment with an address.

SIGNATURE: **PAUL EPSTEIN 1-1-98 561-989-5082**

CR2E037 (10/97)