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Apr 03 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONSDOCUMENT # 736224 (7)
1. Corporation Name
UNIVERSITY HEIGHTS CONDOMINIUM ASSOCIATION, INC.Principal Place of Business Mailing Address
755 NW 84TH LN
CORAL SPRINGS FL 33071 755 NW 84TH LN
CORAL SPRINGS FL 33071-7125

3. Date Incorporated or Qualified 06/28/1976 3a. Date of Last Report 04/29/1996

2. Principal Place of Business 21 1800 NW 4th Ave Apt 13A Suite, Apt. #, etc. 22 Boca Raton FL City & State 23 Boca Raton FL Zip Country 24 33432 25 Boca Raton 29 33432 30 Boca Raton	2a. Mailing Address 26 1800 NW 4th Ave Suite, Apt. #, etc. 27 Apt 13A City & State 28 Boca Raton FL Zip Country 29 33432 30 Boca Raton	4. FEI Number 59-1773924 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	8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☐ No
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9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

PARETTA, ANTHONY L., JR.
755 N.W. 84TH LANE
CORAL SPRINGS FL 33071

81 Name LANCE F BAILEY	82 Street Address (P.O. Box Number is Not Acceptable) 1800 NW 4th Ave	83 Apt 13A	84 City Boca Raton	85 Zip Code FL 33432
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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 Lance F Bailey Treasurer 14 MAR 97
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 D NAME BAILEY, LAUCE STREET ADDRESS 1800 NW 4TH AVE- APT. 13A CITY-ST-ZIP BOCA RATON FL 33432	1.1 TITLE TS 1.2 NAME LANCE F. Bailey 1.3 STREET ADDRESS 1800 NW 4th Ave Apt 13A 1.4 CITY-ST-ZIP Boca Raton FL 33432
TITLE VPD NAME MCGUIRE, KAREN STREET ADDRESS 1800 NW 4TH AVE #13 CITY-ST-ZIP BOCA RATON FL 33432	2.1 TITLE President 2.2 NAME MARY Ruth Graham 2.3 STREET ADDRESS 1800 NW 4th Ave Apt 7A 2.4 CITY-ST-ZIP Boca Raton FL 33432
TITLE D NAME MC GUIN, TUESDEE STREET ADDRESS 1800 N.W. 4TH AVENUE #4 CITY-ST-ZIP BOCA RATON FL 33432	3.1 TITLE VPD 3.2 NAME Kim McGuin 3.3 STREET ADDRESS 1800 NW 4th Ave Apt 13 3.4 CITY-ST-ZIP Boca Raton FL 33432
TITLE TS NAME PARETTA, ANTHONY L. JR. STREET ADDRESS 755 NW 84TH LANE CITY-ST-ZIP CORAL SPRINGS FL 33071	4.1 TITLE D 4.2 NAME Anthony L Paretta Jr 4.3 STREET ADDRESS 3505 Master Dr 4.4 CITY-ST-ZIP Colorado Springs Co. 80907
TITLE D NAME EDRIS, DAVID STREET ADDRESS 1800 NW 4TH AVENUE APT 11 CITY-ST-ZIP BOCA RATON FL	5.1 TITLE D 5.2 NAME Lisa Tilton 5.3 STREET ADDRESS 1800 NW 4th Ave Apt 3A 5.4 CITY-ST-ZIP Boca Raton FL 33432
TITLE NAME STREET ADDRESS CITY-ST-ZIP	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

14. I do 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: Lance F Bailey 18 MAR 97
Signature and typed or printed name of signing officer or director

Date

Daytime Phone # 0026067

CR2E037 (9/96)