FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1996



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State

DIVISION OF CORPORATIONS

DOCUMENT :	# 7	'36	78	6
1. Corporation Name				

(5)

THE 3	862 CONDOMINIUM, INC.									
Principal Place	e of Business	Mailing Address						OMI OPULI DII)}	
3862 NE 171 N. MIAMI FL		3862 NE 171 ST. N. MIAMI FL 33160								
							3. Date Incorporated or Qualified 09/10/1976		te of Last 04/07/1	,
2. Principal Pl	ace of Business	2a. Mailing Address					4. FEI Number			Applied For
21		26					59-2365390		1	Not Applicable
Suite, Apt.	#, etc.	——————————————————————————————————————	Suite, Apt. #, etc.		5. Certificate of Status Desired			Additional		
City & State	<u> </u>	City & State	City & State					Required		
23	5	28	_ , · ·		Election Campaign Financing Trust Fund Contribution			May Be d to Fees		
Zip	Country	Zip	Co	ountry			This corporation has liability for in	tangible ta		
24	25	29	30	,				Yes 🔲		199.002,
	9. Name and Address of Currer	nt Registered Agent					10. Name and Address of New Re	gistered	Agent	••••
				81	Name					
DONAH	UE, JOHN G.			82	Street	Addres	ss (P.O. Box Number is Not Acceptable	<i>i</i>)		
	E 171 ST., #D				2.000			,		
n. Mian	AI BEACH FL 33160			83						
				84	City				85 Zip	Code
								<u> </u>	. `	
or register familiar wi	to the provisions of Sections 617,0502, red agent, or both, in the State of Flori th, and accept the obligations of, Sect	da. Such change was authorize	ed by the	oove-r	named c oration's	corporat s board	ion submits this statement for the purp of directors. I hereby accept the appoi	ose of cha ntment as	nging its re registered	egistered office agent. I am
SIGNATURE	Signature, typed or printed name of registered agent	and title if applicable (NO	TE: Register	eo Agen	nt signature	required v	then reinstating!	DATE		
12.	OFFICERS AN	D DIRECTORS	13	3.			ADDITIONS/CHANGES TO OFFIC	DERS AND	DIRECTO	RS IN 12
TITLE	PD	DELETE	1.1	TIFLE		1	-]	Change	Addition
NAME	Donahue, John G		1 2	NAME						
STREET ADDRESS	3862 NE 171ST STREET		1.3	STREET	ADDRESS					
CITY-ST-ZIP	N MIAMI BEACH FL			CITY-S	T-ZIP					
TITLE	SD	DELETE		TITLE				l	Change	☐ Addition
NAME	SHERMAN, EDNA		22	NAME						
STREET ADDRESS	3862 NE 171ST STREET		2 3	STREET	ADDRESS					
CITY-ST-ZIP	N MIAMI BEACH FL			CITY-S	ST - ZIP				700000	
TITLE	VTD	DELETE		TITLE				l	Change	☐ Addition
NAME STREET ADDRESS	ALLEN, SCOTT 3862 NE 171ST STREET				ADDRESS					
CITY-ST-ZIP	N MIAMI BEACH FL				ADDRESS					
TITLE	14 MIXIMI DENOTITE	DELETE	_	CITY - S TITLE	31-ZIP	1		1	Change	Addition
NAME		_		NAME						
STREET ADDRESS					ADDRESS					
CITY-ST-ZIP				CITY - S						
TITLE		DELETE	_	TITLE		1		1	Change	Addition
NAME			52	NAME						
STREET ADDRESS			5 3	STREET	ADDRESS					
CITY-ST-ZIP			5 4	CITY-S	1 - 2IP					
TITLE		DELETE	61	TITLE					Change	☐ Addition
NAME			62	NAME						
STREET ADDRESS			6.3	STREET	ADDRESS					
CITY - ST - ZIP			6.4	CITY - S	T- 71P					

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)(k), 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:

Why I Woulder of Signing Officer or Director

4/17/96 (315) 945-0374
Date Proces

CR2E037 (12/95)