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NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

DOCUMENT # 738401

CORONADO SOCIAL CLUB, INC.

					,			
Principal Plac	ce of Business	Mailing Address						
20301 WEST COUNTRY CLUB DRIVE AVENTURA FL 33180 US 20301 WEST COUNTRY CL AVENTURA FL 33180 US			ub drive					
Principal Place of Business The Principal Place of Business The Principal Place of Business		2a. Mailing Address			3. Date Incorporated or Qualife 03/18/1977	ed		
Suite, Apt	#, etc.	Suite, Apt. #, etc.			4. FEI Number		Ap	oplied For
22		. 27			59 -1721948		— — — —	ot Applicable
City & Sta	ite	City & State			5. Certifcate of Status Desired			Additional equired
Zip 24	Country 25	Zip 29	Country 30	/	Election Campaign Financin Trust Fund Contribution	g 🗆		May Be to Fees
	9. Name and Address of Current				10. Name and Address of New	/ Registere		
	,		81	Name				
GROSSHANDLER, MAURICE 20335 W COUNTRY CLUB DR			82 Stre		Idress (P.O. Box Number is Not Acceptable)			
#709			83					
	VA FL 33180	0	84	City				
AVENTUR	AVENTURA FL 33 160					E	85 Zip (Code
and the second second	to the provisions of Sections 617.0502 registered agent, or both, in the State of arm familiar with and accept the obligation	CHIVIII UK			· · · /	ept the app	of changing its continent as re $0-9$	registered gistered
11. Pursuant A office or i is agent. He SIGNATURE	Signature typed or printed name of registered agen	of and title a applicable. (NOTE: I	Registered Agen		poration submits this statement for the on's board of directors. I hereby accurate when remstating) ADDITIONS/CHANGES TO C	ne purpose o ept the app	of changing its continent as re	7 DRS IN 12
11. Pursuant All office or to BS agent. He SIGNATURE 12.	Signature typed or printed name of pigistered agen	and title applicable. (NOTE:	Registered Agen		ed when reinstating)	ne purpose o ept the app	of changing its cintment as re 0 - 9	7 DRS IN 12
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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:

SIGNATURE REQUIRED

1/19/99 (305) 682 0/3/

6.2 NAME

6.3 STREET ADDRESS

SIGNATURE:

KLOMPUS, HERB

AVENTURA FL

STREET ADDRESS

20335 W COUNTRY CLUB DR, APT 1801

FILED

Feb 17, 1999 8:00am

Secretary of State

02-17-1999 90099 007 ****61.25