

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1998



FLORIDA DEPARTMENT OF STATE
Sandra B. Mortham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 739059 (4)
1. Corporation Name
STAR ISLAND TAXPAYERS ASSOCIATION, INC.

Principal Place of Business Mailing Address
44 STAR ISLAND 44 STAR ISLAND
MIAMI BEACH FL 33139 MIAMI BEACH FL 33139

2. Principal Place of Business 2a. Mailing Address
21 Suite, Apt. #, etc. 26 Suite, Apt. #, etc.
22 City & State 27 City & State
23 Zip 28 Country 29 Zip 30 Country

3. Date Incorporated or Qualified

05/23/1977

4. FEI Number Applied For
59-1142879 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

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

STRUHL, THEODORE R., M. D.
44 STAR ISLAND
MIAMI BEACH FL 33139

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83 400002555204--9
-06/10/98--01082--022
84 City *****61.25 *****61.25
FL 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	PD	<input type="checkbox"/> DELETE
NAME	STRUHL, THEODORE R MD	
STREET ADDRESS	44 STAR ISLAND	
CITY-ST-ZIP	MIAMI BEACH FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	KIRSNER, HYMAN	
STREET ADDRESS	34 STAR ISLAND	
CITY-ST-ZIP	MIAMI BEACH FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MILLER, LEONARD	
STREET ADDRESS	23 STAR ISLAND	
CITY-ST-ZIP	MIAMI BEACH FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	MORA, MODESTO	
STREET ADDRESS	8 STAR ISLAND	
CITY-ST-ZIP	MIAMI BEACH FL	
TITLE	D	<input type="checkbox"/> DELETE
NAME	KRAMER, THOMAS	
STREET ADDRESS	5 STAR ISLAND	
CITY-ST-ZIP	MIAMI BEACH FL	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	PAUL, HENRY	
STREET ADDRESS	27 STAR ISLAND	
CITY-ST-ZIP	MIAMI BEACH FL	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
1.2 NAME	FORTE, JOHN	
1.3 STREET ADDRESS	3 STAR ISLAND	
1.4 CITY-ST-ZIP	MIAMI BEACH, FL	
2.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
2.2 NAME	BRODY, DR. LAURENCE	
2.3 STREET ADDRESS	6 STAR ISLAND	
2.4 CITY-ST-ZIP	MIAMI BEACH, FL	
3.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
3.2 NAME	ROBINS, GERALD	
3.3 STREET ADDRESS	33 STAR ISLAND	
3.4 CITY-ST-ZIP	MIAMI BEACH, FL	
4.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
4.2 NAME	ESTEFAN, EMILIO	
4.3 STREET ADDRESS	39 STAR ISLAND	
4.4 CITY-ST-ZIP	MIAMI BEACH, FL	
5.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
5.2 NAME	FROST, PHILLIP, M.D.	
5.3 STREET ADDRESS	20 STAR ISLAND	
5.4 CITY-ST-ZIP	MIAMI BEACH, FL	
6.1 TITLE	D	<input type="checkbox"/> Change <input checked="" type="checkbox"/> Addition
6.2 NAME	IACOVELLI, MARC	
6.3 STREET ADDRESS	16 STAR ISLAND	
6.4 CITY-ST-ZIP	MIAMI BEACH, FL	

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.

SEE PAGE 2 - ADDITIONS

SIGNATURE Theodore R Struhl THEODORE R. STRUHL, M.D. 6/1/98 305/6724141

FILED

98 JUN -5 PM 4:12

SECRETARY OF STATE
TALLAHASSEE, FLORIDA



CR2037 (10/97)

2

STAR ISLAND TAXPAYERS ASSOCIATION, INC.

CORPORATION ANNUAL REPORT --- 1998 --- ADDITION

OFFICERS AND DIRECTORS (CONTINUED)

<u>TITLE</u>	<u>OFFICERS AND DIRECTORS</u>	<u>STREET ADDRESS</u>	<u>CITY AND STATE</u>
D	PAUL, GLORIA	27 STAR ISLAND	MIAMI BEACH, FL
D	BRANAM, HARRY	42 STAR ISLAND	MIAMI BEACH, FL
D	RUBINSON, MITCHELL	40 STAR ISLAND	MIAMI BEACH, FL
D	REIBER, NATHAN	37 STAR ISLAND	MIAMI BEACH, FL
D	MILLER, STUART	7 STAR ISLAND	MIAMI BEACH, FL
D	WARE, RHODA	11 STAR ISLAND	MIAMI BEACH, FL
D	GOSSELIN, CARLOS	14 STAR ISLAND	MIAMI BEACH, FL
D	HALLBAUER, ROSALIE	22 STAR ISLAND	MIAMI BEACH, FL
D	VARELA, JEANNETTE	43 STAR ISLAND	MIAMI BEACH, FL
D	LABRADA, FERNANDO	45 STAR ISLAND	MIAMI BEACH, FL
D	OSORIO, CLAUDIO	15 STAR ISLAND	MIAMI BEACH, FL
D	CORREA, JUAN CARLOS	26 STAR ISLAND	MIAMI BEACH, FL
D	JACOBSON, SAMUEL	31 STAR ISLAND	MIAMI BEACH, FL