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

POCUMENT #Corporation Name

(6)

CAMINO SHERIDAN VILLAS HOMEOWNERS ASSOCIATION, I

FILED May 13 1998 8:00am Secretary of State

j														
Principal Place of Business Mailing Address												a Editis addia isladi albad biling redia addia dispir dispir	I BABAY BABA	ALDII AIDII L ADI
C/O SID RADELOFF						C/O SID RADELOFF					3.	Date Incorporated or Qualified		
2418 N. 37TH AVE.						2416 N. 37TH AVE.					•	01/10/1978		
HOLLYWOOD FL 33021						HOLLYWOOD FL 33021					4.	FEI Number		Applied For
												59-1958133	_	Not Applicable
2. Principal Place of Business						2a. Mailing Address					F	Certificate of Status Desired	\$8.75	Additional
21						26						Continuate of Status Dosinso	Fee I	Required
Suite, Apt. #, etc.						Suite, Apt. #, etc.					6.	Election Campaign Financing		May Be
City & State						City & State					Trust Fund Contribution			
City & State											7. Is this nonprofit corporation a homeowners association? X Yes No			
Zip Country					Zip Country							This corporation owes or has paid the curr		ntennihle
24	25				29				,		ψ.			□ No
9. Name and Address of Curren										10. Name and Address of New Regis			gent	
								81	Ţ	Name				
RADELOFF, SID								82 Street Addre			s (F	P.O. Box Number is Not Acceptable)		
2416 N 37TH AVE								L	<u>.</u>					
HOLLYWOOD FL 33021									1					
								84 C		City			85 Zij	Code
44 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0									Ļ		-1:-	FL	abanalaa	ita ragistarad
 Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named coffice or registered agent, or both, in the State of Florida. Such change was authorized by the corporagent. Fam familiar with, and accept the obligations of, Section 617.0503, Florida Statutes. 												board of directors. I hereby accept the app	ointment a	is registered
SIGNATURE														
	Signature, typed	or prin	ited name of registere						enl i	beriuper enutangia			DIRECTO	100 111 40
12.	Lars		OFFICERS	AND DI	IRE(DELETE DELETE	13					ADDITIONS/CHANGES TO OFFICERS AND	☐ Change	
TITLE	VD NADOOLIG LODDAING							1.1 TITLE					- Andrien	
	NAME MARGOLIS, LORRAINE STREET ADDRESS 2325 N. 371TH AVENUE					· · · · · ·			2 NAME					
11011111000 0								1.3 STREET ADDRESS						
CITY-ST-ZIP TITLE	SD SD							1.4 City-ST-ZiP 2.1 TiTLE				☐ Change	Addition	
NAME	SELVIN, FRAN							2.2 NAME						
STREET ADDRESS	0400 41 00004 4100								2.3 STREET ADDRESS					
CITY-ST-ZIP	HOLLISHOOD EL COCCO								2. 4 CITY-ST-ZIP					
TITLE	PD		-,		☐ OELETE			3.1 TITLE					☐ Change	Addition
HAME	RADELO)FF.	SID					3.2 NAME					_	
STREET ADDRESS	0446 AL APPELL ALSE					3.3			3.3 STREET ADDRESS			•		
CITY-ST-ZIP	HOLLYV		–						3.4. CITY-ST-ZIP					
TITLE						DELETE	_	TITLE					☐ Change	Addition
NAME							4.3	2 NAME	E					
STREET ADDRESS							4.3	STREE	T AD	DORESS				
CITY-ST-ZIP							4.4	CITY-	ST-7	ZIP				
TOTLE						DELETE	5.1	TITLE					☐ Change	Addition
NAME							5.2	NAME						
STREET ADDRESS							5.3	STREE	T AD	DORESS				
CITY-ST-ZIP										CITY-ST-ZIP				
TITLE						DELETE	6.1	TITLE					L Change	Addition
NAME							6.2	NAME						
STREET ADDRESS							6.3	STREE	T AD	DORESS				

Thereby 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 own attachment with an address.