## FILE NOW: FILING FEE IS \$61.25

cøf	ONPROFIT RPORATION JAL'REPORT 1999		<b>Katherir</b> Se <b>c</b> /etar	TMENT OF STATE TO Harris TO State ORPORATIONS	FILE	, D	
	MENT #	143020			99 SEP 23 A	M (1: 05	
1. Corporation Name  VESTIAND MANOR EAST CONDOMINIUM				1	SECRETARY OF STATE TALLAHASSEE, FLORIDA		
Principal Plac	ce of Business	Ma	iling Address	<del>-</del>	-		
		6620 HIAI	O WEST 2nd LEAH, FL.	. COURT, 33012			
2. Principal P	Place of Business	2a.	Mailing Address		3. Date incorporated or Qua	ifed	
Suite, Apt.		27	Suite, Apt. #, etc.		4. FEI Number 59-188095		Applied For Not Applicable
City & Stat	te	28	City & State		5. Certifcate of Status Desire	w     7	5 Additional Required
Ζιρ <b>24</b>	Counti 25	y 29	Zip	Country 30	Election Campaign Financ     Trust Fund Contribution	-	00 May Be led to Fees
		ess of Current Regist	ered Agent	81 Name	10. Name and Address of N	w Registered Agent	
	cent Frias o w 2nd of eah, Fla 330			82 Street /	Address (P.O. Box Number Is Not Acc	<del>29993</del> 7	44
į 1930	, ,			84 City	***	/28/9901047 ***61 <b>.25</b>	
11. Pursuant office or r agent I a	to the provisions of Sec registered agent, or both am familiar with, and acc Vincent	stions 617.0502 and 61, in the State of Floridate obligations of,	Section 617.0503, Flor 7 <i>C</i> applicable (NOTE:	s, the above partied of the corporation	corporation submits this statement for present a treat of directors. I hereby a submit of directors are treated as the reliability of the reliability.	the purpose of changing coept the appointment a 1-28-99	its registered s registered
11. Pursuant office or agent I a SIGNATURE	to the provisions of Secregistered agent, or both am familiar with, and according to the secretary of the se	ctions 617.0502 and 61 h, in the State of Florida cept the obligations of,	Section 617.0503, Flor 7 P1 applicable (NOTE: CTORS	is, the above-perfied of thorized by the corporate Significant Signature in the signature i	Corporation stiffmits this statement for presents a ward of directors. I hereby a square when reinstating)  ADDITIONS/CHANGES TO	the purpose of changing coept the appointment of th	g its registered s registered
11. Pursuant office or ragent I a SIGNATURE  12. TITLE NAME STREET ADDRESS	to the provisions of Secregistered agent, or both am familiar with, and accommodate the secretary of the sec	stions 617.0502 and 61 in the State of Florida the obligations of, STATESSU OF Treasured and title in OFFICERS AND DIRECT	Section 617.0503, Flor 7 <i>C</i> applicable (NOTE:	is, the above-perfied thorizes by the corpo ida Spetutes.  Registered April signature in 13, 1.1 TITLE 12 NAME 1.3 STREET ADDRESS	corporation submits this statement for regions stand of directors. I hereby a control of the con	the purpose of changing coept the appointment a 1-28-99 DATE COFFICERS AND DIRECTOR	g its registered s registered
11. Pursuant office or ragent I a SIGNATURE  12. TITLE NAME	to the provisions of Secregistered agent, or both am familiar with, and accompany of the secretary of the se	stions 617.0502 and 61 In in the State of Florida Lept the obligations of, LAS THESSO OF Treased and title in DEFICERS AND DIRECT	Section 617.0503, Flor 7 P1 applicable (NOTE: CTORS	is, the above-perfied of thorizes by the corporate Setutes.  Registered April signature in 13.  1.1 TITLE  12 NAME	corporation submits this statement for regions board of directors. I hereby a support of the relinating of the relinatin	the purpose of changing coept the appointment a 1-28-99 DATE Char	gits registered s registered  CTORS IN 12  age Maddition
11. Pursuant office or agent I a SIGNATURE  12. THE NAME STREE! ADDRESS CITY-ST-ZIP TITLE	to the provisions of Secregistered agent, or both am familiar with, and accompany of the secretary of the se	etions 617.0502 and 61 a, in the State of Florida April the obligations of, April 12 A	Section 617.0503, Flor  2-7 applicable (NOTE: TORS  DELETE	Registered Aparti signature in 13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-2P  2.1 TITLE  2.2 NAME	corporation submits this statement for regions board of directors. I hereby a support of the relinating of the relinatin	the purpose of changing coept the appointment a 1-28-99 DATE Char	gits registered s registered  CTORS IN 12  age Maddition
11. Pursuant office or ragent I a SIGNATURE  12. THE NAME STREET ADDRESS CITY-ST-ZIP THE NAME STREET ADDRESS CITY-ST-ZIP	THE ASURE  VINCENT F  SECULOR	etions 617.0502 and 61 n, in the State of Florida- iept the obligations of, of Tressor of registered agent and title if DEFICERS AND DIRECT RCA  VERPIA  RIAS OF 1/03	Section 617.0503, Flor  2 of Applicable (NOTE:  TORS  DELETE	is, the above-partied inthorized by the corporate Statutes.  Registered Apart signature in 13.  1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP	corporation submits this statement for regions broard of directors. I hereby a control of the co	the purpose of changing coept the appointment a 2-28-99 DATE Charles C	gits registered s registered  CTORS IN 12  age Maddition
11. Pursuant office or r agent I a SIGNATURE  12. TILE NAME STREET ADDRESS CITY-ST-ZIP TILE NAME STREET ADDRESS CITY-ST-ZIP TILE NAME STREET ADDRESS CITY-ST-ZIP TILE	THE ASURE  VINCENT F  SECULOR	etions 617.0502 and 61 n, in the State of Florida- iept the obligations of, of Tressor of registered agent and title if DEFICERS AND DIRECT RCA  VERPIA  RIAS OF 1/03	Section 617.0503, Flor  2	is, the above-partied inthorized by the corporate by the corporate and the corporate	corporation submits this statement for regions broard of directors. I hereby a control of the co	the purpose of changing coept the appointment a   - 28 - 99  DATE Char	gits registered s registered  CTORS IN 12  Inge Maddition  Inge Addition
11. Pursuant office or r agent I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TALE NAME	to the provisions of Secregistered agent, or both man familiar with, and acc Vincent Signature, typed or printed name of the provision of the secretary of the	etions 617.0502 and 61 n, in the State of Florida- iept the obligations of, of Tressor of registered agent and title if DEFICERS AND DIRECT RCA  VERPIA  RIAS OF 1/03	Section 617.0503, Flor  2 of Applicable (NOTE:  TORS  DELETE	Is, the above-partied inthorized by the corporate Statutes.  Registered Apent signature in 13.  1.1 TITLE 12 NAME 1.3 STREET ADDRESS 1.4 CITY-ST-ZIP 2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY-ST-ZIP 3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4. CITY-ST-ZIP 4.1 TITLE 4.2 NAME	corporation submits this statement for regions broard of directors. I hereby a control of the co	the purpose of changing coept the appointment a 2-28-99 DATE Charles C	gits registered s registered  CTORS IN 12  Inge Maddition  Inge Addition
11. Pursuant office or r agent I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TÎTLE	to the provisions of Secregistered agent, or both man familiar with, and acc Vincent Signature, typed or printed name of the provision of the secretary of the	etions 617.0502 and 61 n, in the State of Florida- iept the obligations of, of Tressor of registered agent and title if DEFICERS AND DIRECT RCA  VERPIA  RIAS OF 1/03	Section 617.0503, Flor  2	is, the above-partied inthorized by the corporate structure.  Registered Apent signature in 13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE	corporation submits this statement for regions broard of directors. I hereby a control of the co	the purpose of changing coept the appointment a   - 28 - 99  DATE Char	gits registered s registered  CTORS IN 12  Inge Maddition  Inge Addition
11. Pursuant office or agent I a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS	to the provisions of Secregistered agent, or both man familiar with, and acc Vincent Signature, typed or printed name of the provision of the secretary of the	etions 617.0502 and 61 n, in the State of Florida- iept the obligations of, of Tressor of registered agent and title if DEFICERS AND DIRECT RCA  VERPIA  RIAS OF 1/03	Section 617.0503, Flor  2	Is, the above-partied inthorized by the corporate Statutes.  Registered Apart signature in 13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME	corporation submits this statement for regions broard of directors. I hereby a control of the co	the purpose of changing coept the appointment a   - 28 - 99  DATE Char	gits registered s registered  CTORS IN 12  age X Addition  age Addition  Addition
11. Pursuant office or ragent 1 a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TALE NAME STREET ADDRESS CITY-ST-ZIP TALE NAME STREET ADDRESS CITY-ST-ZIP TALE NAME STREET ADDRESS CITY-ST-ZIP	to the provisions of Secregistered agent, or both man familiar with, and acc Vincent Signature, typed or printed name of the provision of the secretary of the	etions 617.0502 and 61 n, in the State of Florida- iept the obligations of, of Tressor of registered agent and title if DEFICERS AND DIRECT RCA  VERPIA  RIAS OF 1/03	Section 617.0503, Flor  2-1  Applicable (NOTE:  CTORS  DELETE  DELETE	Is, the above-partied inthorized by the corporate Statutes.  Registered Apart signature in 13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE	corporation submits this statement for regions broard of directors. I hereby a control of the co	the purpose of changing coept the appointment a  1-28-99 DATE OFFICERS AND DIRE Char Char Char	gits registered s registered  CTORS IN 12  age X Addition  age Addition  Addition
11. Pursuant office or ragent 1 a SIGNATURE  12. TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TITLE NAME STREET ADDRESS CITY-ST-ZIP TALE NAME STREET ADDRESS CITY-ST-ZIP TALE NAME STREET ADDRESS CITY-ST-ZIP THLE NAME STREET ADDRESS CITY-ST-ZIP	to the provisions of Secregistered agent, or both man familiar with, and acc Vincent Signature, typed or printed name of the provision of the secretary of the	etions 617.0502 and 61 n, in the State of Florida- iept the obligations of, of Tressor of registered agent and title if DEFICERS AND DIRECT RCA  VERPIA  RIAS OF 1/03	Section 617.0503, Flor  2-1  Applicable (NOTE:  CTORS  DELETE  DELETE	Is, the above-partied inthorized by the corporate Statutes.  Registered Apart signature in 13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  3.1 TITLE  3.2 NAME  3.3 STREET ADDRESS  3.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS	corporation submits this statement for regions broard of directors. I hereby a control of the co	the purpose of changing coept the appointment a  1-28-99 DATE OFFICERS AND DIRE Char Char Char	gits registered s registered  CTORS IN 12  age Maddition  Addition  Addition  Addition  Addition
11. Pursuant office or a agent I a SIGNATURE  12. THE NAME STREET ADDRESS CITY-ST-ZIP THLE	THEASURE  VINCENT  SECTION  THEASURE  VINCENT  SIGNALIFE  VINCENT  THEASURE	etions 617.0502 and 61 n, in the State of Florida- iept the obligations of, of Tressor of registered agent and title if DEFICERS AND DIRECT RCA  VERPIA  RIAS OF 1/03	Section 617.0503, Flor  2/1 Septemble (NOTE:  DELETE  DELETE  DELETE  DELETE	Is, the above-partied inthorized by the corporate Statutes.  Registered Apent signature in 13.  1.1 TITLE  1.2 NAME  1.3 STREET ADDRESS  1.4 CITY-ST-ZIP  2.1 TITLE  2.2 NAME  2.3 STREET ADDRESS  2.4 CITY-ST-ZIP  4.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE  4.2 NAME  4.3 STREET ADDRESS  4.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS  5.4 CITY-ST-ZIP  5.1 TITLE  5.2 NAME  5.3 STREET ADDRESS  5.4 CITY-ST-ZIP  6.1 TITLE	corporation submits this statement for regions broard of directors. I hereby a control of the co	the purpose of changing coept the appointment a	gits registered s registered  CTORS IN 12  age Maddition  Addition  Addition  Addition  Addition