2000 UNIFORM BUSINESS REPORT (UBR)

8/2/

FILED
Aug 21, 2000 8:00 am
Secretary of State
08-02-2000 90124 047 ****61.25

DOCUMENT # 744013

1. Entity Name

COUNTRY CLUB OF MIAMI FAIRWAY TOWNHOUSES ASSOCIA

Principal Place of Business	Mailing Address
19218 BOB O LINK DRIVE MIAMI FL 33015	19054 BOB O LINK DR MIAMI FL 33015

DO NOT WRITE IN THIS SPACE

2. Principal Place of Business	3. Mailing Address
18940 Bob-o-Link Dr	18940 Bob-o-Link Dr
Suite, Apt. #, etc.	Suite, Apt. #, etc.
City & State: Hialeah, FL	City & State: Hialeah, FL
Zip: 33015 Country: USA	Zip: 33015 Country: USA

4. FEI Number: 59-2116396 ☐ Applied For ☒ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent	7. Name and Address of New Registered Agent
FRANZ, JOE 19218 BOB-O-LINK DRIVE HIALEAH FL 33015	Name: Vargas, Roberto Street Address (P.O. Box Number is Not Acceptable): 19012 Bob-o-Link Drive City: Hialeah, FL FL Zip Code: 33015

9. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the state of Florida.

SIGNATURE: Roberto Vargas, President — 7/15/00
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

FILE NOW: FEE IS $61.25 After September 13, 2000 min. will be $236.25	9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees	Make Check Payable to Department of State

10. OFFICERS AND DIRECTORS			11. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 10		
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	VD GRAY, ANN 19156 BOB O LIND DRIVE MIAMI FL 33015	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	P Roberto Vargas 19012 Bob-o-Link Drive Hialeah, FL 33015	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	SD BENSON, KELLY 19060 BOB O LINK DRIVE MIAMI FL 33015	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	V Eduardo Heria 19230 Bob-o-Link Drive Hialeah, FL 33015	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	TD PACHECO, CELIA 19054 BOB-O-LINK DRIVE HIALEAH FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T Elizabeth Forrester 18940 Bob-o-Link Drive Hialeah, FL 33015	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D CROSSON, HARRY 19328 BOB O LINK DRIVE MIAMI FL 33015	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D ELSIE REUWER 19106 Bob-O-Link Dr. HIALEAH, FL 33015	☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	PD FRANZ, JOE 19218 BOB O LINK DRIVE HIALEAH FL	☒ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S Aldyth Roach 18932 Bob-o-Link Drive Hialeah, FL 33015	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S Aldyth Roach 18932 Bob-o-Link Drive Hialeah, FL 33015	☐ Delete	TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D Kim Thompson 19306 Bob-o-Link Drive Hialeah, FL 33015	☒ Change ☐ Addition

CR2E037 (5/00)

12. 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 report or supplemental 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 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: ELIZABETH FORRESTER Elizabeth Forrester 7-15-00 305-829-7242
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #