

FILE NOW: FILING FEE IS \$61.25

NONPROFIT
CORPORATION
ANNUAL REPORT
1996



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

DOCUMENT # 745574 (4)
1. Corporation Name
WOODSCAPE TOWNHOMES CONDOMINIUM ASSOCIATION, INC



Principal Place of Business

Mailing Address

3925 W WOODSCAPE DR
STE. 146
MIRAMAR FL 33023
US

3925 W. WOODSCAPE DR
STE. 146
MIRAMAR FL 33023
US

3. Date Incorporated or Qualified
01/16/1979

3a. Date of Last Report
04/20/1995

2. Principal Place of Business
21 3925 W. Woodscape Drive
Suite, Apt. #, etc.
22 NO suite #
City & State
23 Miramar, FL
Zip
24 33023
Country
25 US

2a. Mailing Address
26 3925 W. Woodscape Drive
Suite, Apt. #, etc.
27 NO suite #
City & State
28 Miramar, FL
Zip
29 33023
Country
30 US

4. FEI Number
59-2043076
Applied For
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
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☒ Yes ☐ No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

KAYE & ROGER PA
1500 W CYPRESS CREEK RD
STE 207
FT LAUDERDALE FL 33309

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
85 Zip Code
FL

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 appropriate

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
SD
JACOBS, CLAUDIA
6929 SW 36 COURT
MIRAMAR FL
☐ DELETE
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
TD
DONNER, KENNETH
6836 SW 37TH ST.
MIRAMAR FL
☒ DELETE
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VD
REISNER, TODD
4033 SW 69TH WAY
MIRAMAR FL
☐ DELETE
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
VPD
BEREN, RALPH
3705 S.W. 69TH AVENUE
MIRAMAR FL
☐ DELETE
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
PD
SAPOLSKY, HERBERT
6829 SW 36 CT
MIAMI FL
☐ DELETE
TITLE
NAME
STREET ADDRESS
CITY-ST-ZIP
☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE
1.2 NAME
1.3 STREET ADDRESS
1.4 CITY-ST-ZIP
Vice President, D
Jo Ann Edwards
3824 SW 70 ave
Miramar, FL 33023
☒ Change ☒ Addition
2.1 TITLE
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP
President, D
Reisner, Todd
4033 SW 69 way
Miramar, FL 33023
☒ Change ☐ Addition
3.1 TITLE
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP
Treasurer, D
Beren, Ralph
3705 SW 69 ave
Miramar, FL 33023
☒ Change ☐ Addition
4.1 TITLE
4.2 NAME
4.3 STREET ADDRESS
4.4 CITY-ST-ZIP
Vice President, D
Sapolsky, Herbert
6829 SW 36 ct Miramar, FL 33023
☒ Change ☐ Addition
5.1 TITLE
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP
400001772864
-04/08/96--01094--032
***61.25
☐ Change ☐ Addition
6.1 TITLE
6.2 NAME
6.3 STREET ADDRESS
6.4 CITY-ST-ZIP

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and does not qualify for the exemption stated in Section 119.07(3)(k), 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.

SIGNATURE: Todd Reisner

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

TODD REISNER
PRESIDENT 4/1/96 305-987-1122

DATE

Daytime Phone #

CR2E037 (12/95)