

FILE NOW: FILING FEE IS \$61.25

NONPROFIT  
CORPORATION  
ANNUAL REPORT  
1999



FLORIDA DEPARTMENT OF STATE  
Katherine Harris  
Secretary of State  
DIVISION OF CORPORATIONS

FILED  
Apr 01, 1999 8:00 am  
Secretary of State

04-01-1999 90005 020 \*\*\*\*61.25

DOCUMENT # 746865

1. Corporation Name

CAMINO REAL VILLAGE ASSOCIATION, INC.

Principal Place of Business

C/O CAMPBELL PROP.  
1215 E. HILLSBORO BLVD.  
DEERFIELD BEACH FL 33441  
US

Mailing Address

C/O CAMPBELL PROP.  
1215 E. HILLSBORO BLVD.  
DEERFIELD BEACH FL 33441  
US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

23 Zip Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip Country

3. Date Incorporated or Qualified

04/24/1979

4. FEI Number

59-2051967

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

9. Name and Address of Current Registered Agent

CAMPBELL PROPERTY MANAGEMENT  
1215 E. HILLSBORO BLVD.  
DEERFIELD BEACH FL 33441

10. Name and Address of New Registered Agent

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 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 P  
NAME TEIFER, STEPHEN  
STREET ADDRESS 5900 CAMINO DEL SOL #407  
CITY-ST-ZIP BOCA RATON FL 33433

TITLE VP  
NAME BREMKE, ROBERT  
STREET ADDRESS 5900 CAMINO DEL SOL #104  
CITY-ST-ZIP BOCA RATON FL 33433

TITLE T  
NAME SALTZMAN, CHARLES  
STREET ADDRESS 5801 CAMINO DEL SOL #300  
CITY-ST-ZIP BOCA RATON FL 33433

TITLE D  
NAME WALTERS, ANN  
STREET ADDRESS 5901 CAMINO DEL SOL #202  
CITY-ST-ZIP BOCA RATON FL 33433

TITLE D  
NAME YAFFE, BILL  
STREET ADDRESS 5801 CAMINO DEL SOL #304  
CITY-ST-ZIP BOCA RATON FL 33433

TITLE D  
NAME RISOFF, WALT  
STREET ADDRESS 5700 CAMINO DEL SOL #200  
CITY-ST-ZIP BOCA RATON FL 33433

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

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  
5.4 CITY-ST-ZIP

6.1 TITLE  
6.2 NAME  
6.3 STREET ADDRESS  
6.4 CITY-ST-ZIP

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, with all other like empowered.

SIGNATURE:

STEPHEN M. TEIFER REQUESTED

3-25-99 (951)

Date Daytime Phone #

CR2E037 (11/98)

0044531