FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 748997

1. Corporation Name

CHERRY GROVE CONDOMINIUM NO. 10/5 ASSOCIATION, 1 NC.

Country

Principal Place of Business

MIAMI FL 33173

22

23

Zip

8621 SOUTHWEST 93RD CT.

2. Principal Place of Business

Suite, Apt. #, etc.

City & State

Mailing Address

8621 SOUTHWEST 93RD CT.

MIAMI FL 33173

2a. Mailing Address

City & State

Suite, Apt. #, etc.

26

27

28

FILED Jan 20, 1999 8:00am Secretary of State

01-20-1999 90013 010 ****61.25



3. Date Incorporated or Qualifed

NOT APPLICABLE

5. Certifcate of Status Desired

6. Election Campaign Financing

09/20/1979

4. FEI Number

24	25	29	30			Trust Fu	nd Contribution		Added to	Fees	
9. Name and Address of Current Registered Agent						10. Name and Address of New Registered Agent					
	:	# 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1		81	Name						
VANCEV	DOSE A.				Ctunet 1	ddagae (D.O. Parish	lumber is Alet Acco	atabla)			
	ROSE A			82	Street A	daress (P.O. Box I	Number is Not Acce	splable)			
F 732	V 93RD CT.			83					·		
MIAMI F	L 331/3			* *							
				84	City			FL	85 Zip C	ode	
Const. Com.		3	· · .							24 4 1 W 12 1 2 4 5 1	
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.											
SIGNATUR	E	12 3 3 5				1 ()		DATE			
46		me of registered agent and title if applicable.	3.	t signature req	ulred when reinstating)	NS/CHANGES TO		D DIRECTOR	RS IN 12		
12.		OFFICERS AND DIRECTORS				ADDITION	10/01/11/02/07/07	011102/107#1	Change	Addition	
TITLE	PD	_	•	TILE					□ onango		
NAME	YANCEY, ROSE A			NAME						ł	
STREET ADDRES	s 8621 Southwes 7			STREET	ADDRESS	. *	• 1				
CITY-ST-ZIP	1112 4111 1 4 4 4 1 1 1		CTY-\$1	-ZIP							
TITLE	SD	D DELETE 2.1		ITTLE					Change	☐ Addition	
NAME	HARDING, STACIE	R.	2.2	NAME							
STREET ADDRES	AN A COUNTRICOT OFFIL AUC		STREET	ADDRESS							
CITY-ST-ZIP	I		4 CITY-S	T-ZiP		2.5	• •		*		
TITLE	TD	DI		TITLE				*	Change	Addition	
NAME	YANCEY, REBECC	Δ Δ	3.2	NAME							
					ADORESS					. 1	
STREET ADDRES	1 1111 5 00470			. CITY-S						}	
CITY-ST-ZIP	MIAMI PL 33170			1 MILE	1-21				Change	Addition	
TITLE					l					_	
NAME				2 NAME							
STREET ADDRES	ss _{j.}	• .	1 "		ADDRES\$						
CITY-ST-ZIP				CITY-S	-ZIP					Addition	
TITLE		□ Di		TITLE					Change	Addition	
NAME	j		5.2	NAME	1					1	
STREET ADDRES	SS		5.3	STREET	ADDRESS					ŀ	
CITY+ST-ZIP	11.		5.4	4 CITY-S	r-ZIP						
TITLE	3	IO 🗆	ELETE 6.	TITLE					Change	☐ Addition	
NAME			6.3	2 NAME		•	•				
STREET ADDRES	88		6.3	STREET	ADDRESS			•			
	~		6.	4 CFTY-S	r-ZIP						
CITY-ST-ZIP	v certify that the informat	ion supplied with this filing does not a				in Section 119.076	3)(i). Florida Statute	s. I further cer	tify that the in	formation	

Country

I hereby certify that the information supplied with this filling 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:

SIGNATURE REQUIROSE ANNA YANCEY

1/4/99

305 592 6620

Daytime Phone #

CR2E037 (11/98)

Applied For

Not Applicable

\$8.75 Additional

Fee Required

\$5.00 May Be