

FILE NOW: FILING FEE IS \$61.25

APPROVED
AND
FILED

98 JUN 10 PM 4: 25

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # 751575 (2)

1. Corporation Name
MISSION LAKES CONDOMINIUM ASSOCIATION, INC.,

Principal Place of Business C/O MICHAEL A. FISHLER, RECEIVER 116 S.E. SIXTH COURT FT. LAUDERDALE FL 33301 US	Mailing Address C/O MICHAEL A. FISHLER, RECEIVER 116 S.E. SIXTH COURT FT. LAUDERDALE FL 33301 US
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3. Date Incorporated or Qualified 03/17/1980	Applied For <input type="checkbox"/>	Not Applicable <input checked="" type="checkbox"/>
4. FEI Number NOT APPLICABLE		
5. Certificate of Status Desired <input type="checkbox"/>	\$8.75 Additional Fee Required	
6. Election Campaign Financing Trust Fund Contribution <input type="checkbox"/>	\$5.00 May Be Added to Fees	
7. Is this nonprofit corporation a homeowners association? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
8. This corporation owes or has paid the current year intangible Personal Property Tax due June 30. <input type="checkbox"/> Yes <input type="checkbox"/> No		

2. Principal Place of Business	2a. Mailing Address
21 Suite, Apt. #, etc.	26 Suite, Apt. #, etc.
22 City & State	27 City & State
23 Zip	28 Zip
24 Country	29 Country
25	30

9. Name and Address of Current Registered Agent

**FISHLER, MICHAEL A RECEIVE
FISCHLER & FRIEDMAN, P.A.
116 S.E. SIXTH COURT
FORT LAUDERDALE FL 33301**

10. Name and Address of New Registered Agent

81 Name
82 Street Address (P.O. Box Number is Not Acceptable)
83
84 City
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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS

TITLE	REC1 <input type="checkbox"/> DELETE
NAME	FISHLER, MICHAEL A
STREET ADDRESS	116 S.E. SIXTH COURT
CITY-ST-ZIP	FORT LAUDERDALE FL 33301
TITLE	REC1 <input type="checkbox"/> DELETE
NAME	FISHLER, MICHAEL A
STREET ADDRESS	116 S.E. SIXTH COURT
CITY-ST-ZIP	FORT LAUDERDALE FL 33301
TITLE	REC1 <input type="checkbox"/> DELETE
NAME	FISHLER, MICHAEL A
STREET ADDRESS	116 S.E. SIXTH COURT
CITY-ST-ZIP	FORT LAUDERDALE FL 33301
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	
TITLE	<input type="checkbox"/> DELETE
NAME	
STREET ADDRESS	
CITY-ST-ZIP	

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	
1.3 STREET ADDRESS	
1.4 CITY-ST-ZIP	
2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	
2.3 STREET ADDRESS	
2.4 CITY-ST-ZIP	
3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME	300002557683--3
3.3 STREET ADDRESS	-06/12/98--01009--001
3.4 CITY-ST-ZIP	*****61.25 *****61.25
4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME	
4.3 STREET ADDRESS	
4.4 CITY-ST-ZIP	
5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME	89 6/10
5.3 STREET ADDRESS	
5.4 CITY-ST-ZIP	
6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
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.

CR2E037 (1097)

FISCHLER & FRIEDMAN, P.A.

ATTORNEYS AT LAW
116 SOUTHEAST SIXTH COURT
FORT LAUDERDALE, FLORIDA 33301

MICHAEL A. FISCHLER*
CIRCUIT COURT MEDIATOR
FAMILY COURT MEDIATOR
HOWARD S. FRIEDMAN*

TELEPHONE
(954) 763-5778
FACSIMILE
(954) 763-3238

* ALSO MEMBER FEDERAL BAR

June 5, 1998

Division of Corporations
Attn: Stacy
P.O. Box 6327
Tallahassee, FL 32314

Re: Mission Lakes Condominium Association, Inc.
Ref. Number: 751575

Dear Stacy:

Pursuant to our telephone conversation of today, this will confirm that you have a note in your office with regard to the above referenced non-profit corporation's return being filed without listing three directors or trustees. Accordingly, as Receiver, I am returning the original corporate return for Mission Lakes Condominium Association, Inc., stub, and this firm's check no. 70 in the amount of \$61.25.

Thank you for your cooperation and assistance in this matter.

Very truly yours,

FISCHLER & FRIEDMAN, P.A.



MICHAEL A. FISCHLER

MAF:jg
Enclosure