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NONPROFIT CORPORATION ANNUAL REPORT
1999

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

DOCUMENT # 753996

1. Corporation Name

CONDOMINIUM "B" ASSOCIATION AT SHERWOOD SQUARE, INC.

Principal Place of Business	Mailing Address
1155 RIVERSIDE DR CORAL SPRINGS FL 33071	1155 RIVERSIDE DR CORAL SPRINGS FL 33071

2. Principal Place of Business — 21
Suite, Apt. #, etc. — 22
City & State — 23
Zip — 24 Country — 25

2a. Mailing Address — 26
Suite, Apt. #, etc. — 27
City & State — 28
Zip — 29 Country — 30

3. Date Incorporated or Qualifed: 08/29/1980

4. FEI Number: 59-2096192 ☐ Applied For ☐ Not Applicable

5. Certifcate 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

WIELOCH, JEAN
1075 RIVERSIDE DRIVE
#306
CORAL SPRINGS FL 33071

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 Jean Wieloch JEAN WIELOCH 3-2-99
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS			13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	SD	☐ DELETE	1.1 TITLE		☐ Change ☐ Addition
NAME	WIELOCH, JEAN		1.2 NAME		
STREET ADDRESS	1075 RIVERSIDE DR, #306		1.3 STREET ADDRESS		
CITY-ST-ZIP	CORAL SPRINGS FL 33071		1.4 CITY-ST-ZIP		
TITLE	TD	☐ DELETE	2.1 TITLE		☐ Change ☐ Addition
NAME	DWYER, JOHN		2.2 NAME		
STREET ADDRESS	1075 RIVERSIDE DRIVE 507		2.3 STREET ADDRESS		
CITY-ST-ZIP	CORAL SPRINGS FL		2.4 CITY-ST-ZIP		
TITLE	VD	☐ DELETE	3.1 TITLE		☐ Change ☐ Addition
NAME	BRAVERMAN, MARK		3.2 NAME		
STREET ADDRESS	1075 RIVERSIDE DR, #508		3.3 STREET ADDRESS		
CITY-ST-ZIP	CORAL GABLES FL 33071		3.4. CITY-ST-ZIP		
TITLE	PD	☑ DELETE	4.1 TITLE	TD	☐ Change ☑ Addition
NAME	SUSSAN, AYSAR		4. 2 NAME	JOSEPH GIOVANNINI	
STREET ADDRESS	1075 RIVERSIDE DR, #502		4.3 STREET ADDRESS	1075 RIVERSIDE DRIVE #106	
CITY-ST-ZIP	CORAL SPRINGS FL 33071		4.4 CITY-ST-ZIP	CORAL SPRINGS, FL 33071	
TITLE	D	☑ DELETE	5.1 TITLE	D	☐ Change ☑ Addition
NAME	LANNING, WILLIAM		5.2 NAME	STELLA HEIMINK	
STREET ADDRESS	1079 RIVERSIDE DR, #104		5.3 STREET ADDRESS	1075 RIVERSIDE DRIVE #304	
CITY-ST-ZIP	CORAL SPRINGS FL 33071		5.4 CITY-ST-ZIP	CORAL SPRINGS, FL 33071	
TITLE		☐ DELETE	6.1 TITLE		☐ Change ☐ Addition
NAME			6.2 NAME		
STREET ADDRESS			6.3 STREET ADDRESS		
CITY-ST-ZIP			6.4 CITY-ST-ZIP		

CR2E037 (11/98)

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: Jean Wieloch JEAN WIELOCH 2-18-99 561-394-8162
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #