FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED
95 APR 28 PM 6:45
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **754207** **(9)**

1. Corporation Name
REXMERE LEAGUE OF HOME OWNERS INC.

Principal Place of Business	Mailing Address
1261 SW 115TH AVE. FT LAUDERDALE FL 33325 US	11511 SW 12TH CT FT LAUDERDALE FL 33325-4016

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: **09/17/1980**
3a. Date of Last Report: **02/15/1994**
4. FEI Number: **59-2088375** ☐ Applied For ☐ Not Applicable
2. Principal Place of Business — 21
2a. Mailing Address — 26
Suite, Apt. #, etc. — 22 / 27
City & State — 23 / 28
Zip — 24 / Country — 25 / Zip — 29 / Country — 30
5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required
6. Election Campaign Financing Trust Fund Contribution ☐ **$5.00** May Be Added to Fees
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ **$68.75** Supplemental Fee Not Required
8. *This corporation has liability for intangible tax under S. 199.032, Florida Statutes* ☐ Yes ☑ No

9. Name and Address of Current Registered Agent

LIBUTTI, CARL
1261 SW 115TH AVE
FT. LAUDERDALE FL 33325

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: Carl Libutti — 4-21-95
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	VD	1.1 TITLE	☐ Change ☐ Addition
NAME	HOWARD, JOYCE	1.2 NAME	
STREET ADDRESS	11511 SW 12TH CT	1.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL	1.4 CITY-ST-ZIP	
TITLE	VD	2.1 TITLE	☐ Change ☐ Addition
NAME	DEMAREST, ANN	2.2 NAME	
STREET ADDRESS	11730 S.W. 11TH MANOR	2.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUDERDALE FL	2.4 CITY-ST-ZIP	
TITLE	DP	3.1 TITLE	☐ Change ☐ Addition
NAME	YOUNGHANS, HAL	3.2 NAME	
STREET ADDRESS	11458 REXMERE BLVD	3.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUD. FL	3.4 CITY-ST-ZIP	
TITLE	T	4.1 TITLE	☐ Change ☐ Addition
NAME	LIBUTTI, CARL	4.2 NAME	
STREET ADDRESS	1261 SW 115TH AVE	4.3 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL	4.4 CITY-ST-ZIP	
TITLE	S	5.1 TITLE	☐ Change ☐ Addition
NAME	MCCORNAC, MARY	5.2 NAME	
STREET ADDRESS	11310 SW 12TH HANOR	5.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUD. FL	5.4 CITY-ST-ZIP	
TITLE	SA	6.1 TITLE	☐ Change ☐ Addition
NAME	J.J. MILLER	6.2 NAME	
STREET ADDRESS	1248 SW 114 WAY	6.3 STREET ADDRESS	
CITY-ST-ZIP	FT. LAUD. FL	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)(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.

SIGNATURE: Carl Libutti — 4-21-95 — 305-474-5412
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #
CARL LIBUTTI

0047177