FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1997



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 754207

(9)

REXMERE LEAGUE OF HOME OWNERS INC.

Principal Place of Business

Mailing Address

1261 SW 115TH AVE. FT LAUDERDALE FL 33325 11458 REXMERE BLVD. ET LAUDERDALE EL 33325-4 FILED Apr 08 1997 8:00am Secretary of State

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FI LAUDENDALE PL 33325 FI LAUDENDALE PL 33325-4016										
105					Ī	3. Date Incorporated or Qualified				
2. Principal Place of Business 2a. Mailing Address							4. FEI Number		Applied For	
21 11492 SW 10 Court 26 11492 SW 10			1.0	Court		59-2088375		Not Applicable		
Sulte, Apt. #, etc. Suile, Apt. #, etc.						5. Certificate of Status Desired	7	5 Additional		
27				·				Fee	Required	
City & State City & State 23 Ft. Lauderdale, FL 28 Ft. Lauderda				3 - 19T		6. Election Campaign Financing		00 May Be		
23 Ft. 1	Lauger	Country	Zip Lauder	. Lauderdale, FL			Trust Fund Contribution		ed to Fees	
 	2.5	⊢ ′ ₋	 -1 '	<u> </u>			8. This corporation has liability for in	ntangible tax unde Yes 🔀 No	r s. 199.032,	
24 333		25 Broward and Address of Curre		130	Broward	L	10. Name and Address of New Reg			
					81 Name			,		
KRUTH	CADI				Edward M. Null					
		VF			82 Street Address (P.O. Box Number is Not Acceptable) 11492 SW 10 Court					
1364 6W 4 15TH AVE FT. JALDERDALE FL 33325 _X						83 T1492 SW 10 COULC				
* XXX	KKKKKK	XXXXX	•		Od Ch.			حاجما	- 0- 4-	
					84 City	+ . 1	Lauderdale, FL		ip Code 33325	
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. La	egistered ag m familia <u>r</u> wi	ith, and accept the obli	to of Florida. Such change was gations of, Section 617.0503, Fi	autnor Iorida S	izea by the corp Statulos.	poration	is board of directors, I hereby accep		-	
SIGNATURE 5 1 / bull 6. M. NULL TREASUREN								4 2-9	7	
Signature, typed or printed name of registered agent and title if applicable (NOTE Registered Agen					tored Agont signature	required :		DATE		
12.	- Cim	OFFICERS A	ND DIRECTORS		13.		ADDITIONS/CHANGES TO OFFIC			
TITLE	DVP	WZŽIADOLO	☐ DELETE	1	.1 THLE	Pre	esident,Director	Chang	e 🗀 Addition	
NAME		CK/HAROLD	•		.2 NAME					
STREET ADDRESS		SW 12 MANOR			.3 STREET ADDRESS]]	
CITY-ST-ZIP TITLE	DVP	ID. FL 33325	☐ DELETÉ		.4 CITY-ST-ZIP .1 TITLE			Chanc	e Addition	
NAME	,	ED DAVID	בן טנונונ						le 🗀 Modition	
STREET ADDRESS	WHEELER, DAVID RESS 11323 SW 13 PL			2.2 NAME 2.3 STREET ADDRESS						
CITY-ST-ZIP		ID. FL 33325			. 4 CHY-ST-ZIP				ı	
TITLE	DP DP	D. 1 L 00020	DELETE		.1 TITLE	Tre	easurer, Director	Chanc	e XX Addition	
NAME		HANS, HAL			.2 NAME		ward N. Null		NA.	
STREET ADDRESS		REXMERE BLVD			.3 STREET ADDRESS		192 SW 10 Court			
CITY-ST-ZIP	FT. LAU			- 1	.4. C(1Y-S1-Z)P		Lauderdale, FL	33335		
TITLE	T		DELETE		.1 TOTLE	1 10.0		Chang	e Addition	
NAME	LIBUTTI	, CARL		- 4.	. 2 NAME					
STREET ADDRESS		N 115TH AVE		4.	.3 STREET ADDRESS					
CITY-ST-ZIP	FT LAUI	Derdale fl		4.	.4 CITY-\$1-ZIP					
TALE	8		☐ DELETE	5.	.1 TITLE			☐ Chang	e 🔲 Addition	
NAME		NAC, MARY		5.	.2 NAME					
STREET ADDRESS		W 12TH HANOR		5.	.3 STREET ADDRESS					
CITY-ST-ZIP	FT. LAU	D. FL	1997 (ALC 1 & 1972 ALC 1 ALC	5.	4 CITY-ST-ZIP					
TITLE	SA		☐ DELETE	6.	.1 TITLE			☐ Chang	e Addition	
NAME	J.J. MILI			6.	.2 NAME					
STREET ADDRESS		V 114 WAY		6.	3 STREFT ADDRESS					
CITY-ST-ZIP	FT. LAU	D. FL		6	4 CHY-ST-ZIP	l				

14. I do 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.

Marie De Miller Colores Colore