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Mar 06 1998 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **754563** (5)

1. Corporation Name

**ROLLING HILLS GOLF AND TENNIS CLUB CONDOMINIUM V
I ASSOCIATION, INC.**

Principal Place of Business

Mailing Address

**3100 W. ROLLING HILLS CIRCLE
BLDG. #6
DAVIE FL 33328-1949**

**3100 W. ROLLING HILLS CIRCLE
BLDG. #6
DAVIE FL 33328-1949**

3. Date Incorporated or Qualified

10/10/1980

4. FEI Number

59-2060542

Applied For

Not Applicable

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 **25**

29 **30**

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

**MARK L GAETA, ESO
1000 SOUTH FEDERAL HIGHWAY SUITE 103
FT LAUDERDALE FL 33316**

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

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE **D**
NAME **D'ALASSANDRO, JOE**
STREET ADDRESS **3100 W. ROLLING HILLS CR., #602**
CITY-ST-ZIP **DAVIE FL** ☒ DELETE

TITLE **1** **DTS**
NAME **BLAKE, HARRIETTE**
STREET ADDRESS **3100 W. ROLLING HILLS CR, #707**
CITY-ST-ZIP **DAVIE FL** ☐ DELETE

TITLE **2** **VPD**
NAME **MARTIN, EMMA DEBRA**
STREET ADDRESS **3100 ROLLING HILL CT 206**
CITY-ST-ZIP **DAVIE FL** ☐ DELETE

TITLE **PD**
NAME **COLLINS, KEN**
STREET ADDRESS **3100 W. ROLLING HILLS CR 102**
CITY-ST-ZIP **DAVIE FL** ☒ DELETE

TITLE **3** **D**
NAME **GRANT, FRANCES**
STREET ADDRESS **3100 W. ROLLEVY HILLS CR 304**
CITY-ST-ZIP **DAVIE FL** ☐ DELETE

TITLE **PD** **KELLY FLOYD**
NAME **KELLY FLOYD**
STREET ADDRESS **3100 W. ROLLING HILLS CR, #104**
CITY-ST-ZIP **DAVIE FL 33328** ☐ DELETE

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12.

1.1 TITLE **4** **D** **RICHARD HUSS** ☒ Change ☒ Addition
1.2 NAME
1.3 STREET ADDRESS **3100 W. ROLLING HILLS CR #407**
1.4 CITY-ST-ZIP **DAVIE FL 33328**

2.1 TITLE ☐ Change ☐ Addition
2.2 NAME
2.3 STREET ADDRESS
2.4 CITY-ST-ZIP

3.1 TITLE ☐ Change ☐ Addition
3.2 NAME
3.3 STREET ADDRESS
3.4 CITY-ST-ZIP

4.1 TITLE **5** **PD** **Kelly Floyd** ☒ Change ☒ Addition
4.2 NAME
4.3 STREET ADDRESS **3100 W. ROLLING HILLS CR #104**
4.4 CITY-ST-ZIP **DAVIE FL 33328**

5.1 TITLE ☐ Change ☐ Addition
5.2 NAME
5.3 STREET ADDRESS
5.4 CITY-ST-ZIP

6.1 TITLE **PD** **KELLY FLOYD** ☐ Change ☐ Addition
6.2 NAME
6.3 STREET ADDRESS **3100 W. ROLLING HILLS CR, #104**
6.4 CITY-ST-ZIP **DAVIE FL 33328**

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.

SIGNATURE: **HARRIETTE BLAKE (Secy)** **Kariette Blake** 2/27/98 954-474-4179

CR2E037 (10/97)