

FILE NOW: FILING FEE IS \$61.25

FILED
Mar 24, 1999 8:00 am
Secretary of State

03-24-1999 90085 031 ****61.25

0035185

NONPROFIT CORPORATION ANNUAL REPORT 1999



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

DOCUMENT # 756387

1. Corporation Name

THE OFFICE VILLAGE CONDOMINIUM ASSOCIATION, INC.

Principal Place of Business

14050 SW 84 ST
 SUITE 102
 MIAMI FL 33183
 US

Mailing Address

14050 SW 84 ST
 SUITE 102
 MIAMI FL 33183
 US



2. Principal Place of Business

21 Suite, Apt. #, etc.

22 City & State

24 Zip 25 Country

2a. Mailing Address

26 Suite, Apt. #, etc.

27 City & State

28 Zip 29 Country 30

3. Date Incorporated or Qualified

02/16/1981

4. FEI Number

59-2395163

Applied For
 Not Applicable

5. Certificate 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

ADAMS, KAY GARBUTT
 14050 SW 84 ST
 SUITE 102
 MIAMI FL 33183

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

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	TD SUTTON, JOHN	1.1 TITLE	VD
NAME	7721 SW 62 AVENUE	1.2 NAME	
STREET ADDRESS	MIAMI FL	1.3 STREET ADDRESS	
CITY-ST-ZIP		1.4 CITY-ST-ZIP	
TITLE	PD MARLIN, ROBERT	2.1 TITLE	PD
NAME	7701 SW 62ND AVE	2.2 NAME	ABRAMS, FRANK
STREET ADDRESS	MIAMI FL	2.3 STREET ADDRESS	7731 SW 62 AVE
CITY-ST-ZIP		2.4 CITY-ST-ZIP	Miami, FL 33143
TITLE	S ADAMS, KAY GARBUTT	3.1 TITLE	
NAME	14050 SW 84TH ST, 102	3.2 NAME	
STREET ADDRESS	MIAMI FL	3.3 STREET ADDRESS	
CITY-ST-ZIP		3.4 CITY-ST-ZIP	
TITLE	D GLENN, WILLIAM D.	4.1 TITLE	DT
NAME	7741 S.W. 62ND AVE.	4.2 NAME	
STREET ADDRESS	MIAMI FL	4.3 STREET ADDRESS	
CITY-ST-ZIP		4.4 CITY-ST-ZIP	
TITLE	D LIVINGSTONE, ANTHONY	5.1 TITLE	
NAME	7731 SW 62 AVENUE	5.2 NAME	
STREET ADDRESS	MIAMI FL	5.3 STREET ADDRESS	
CITY-ST-ZIP		5.4 CITY-ST-ZIP	
TITLE	DV LIVINGSTONE, DON	6.1 TITLE	D
NAME	7711 SW 62 AVENUE	6.2 NAME	
STREET ADDRESS	MIAMI FL	6.3 STREET ADDRESS	
CITY-ST-ZIP		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, with all other like empowered.

SIGNATURE: *Kay Adams* SIGNATURE REQUIRED

3/15/99 305-386-4855

CR2E037 (11/98)