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Jan 23 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 # 757113 (6)

1. Corporation Name
ALHAMBRA CIRCLE HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business 9595 TOLEDO LANE FT LAUDERDALE FL 33324 US	Mailing Address 9525 TOLEDO LANE FORT LAUDERDALE FL 33324
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3. Date Incorporated or Qualified
04/06/1981

4. FEI Number
59-2192247

Applied For Not Applicable

21. Principal Place of Business Sulte, Apt. #, etc.	2a. Mailing Address 9595 Toledo Lane
22. City & State	27. City & State FT. LAUDERDALE FL
23. Zip 33324	29. Country U.S.A.

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. Is this nonprofit corporation a homeowners association?
 Yes No

8. This corporation owes or has paid the current year Intangible Personal Property Tax due June 30. Yes No

9. Name and Address of Current Registered Agent

**BLANDER, MORRAY H.
9540 TOLEDO LANE
FT LAUDERDALE FL 33324**

10. Name and Address of New Registered Agent

81. Name **CURRY, JOHN A**

82. Street Address (P.O. Box Number is Not Acceptable)
9575 Toledo Lane

84. City **FT. LAUDERDALE FL** 85. Zip Code **33324**

11. Pursuant to the provisions of Sections 617.0501 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 *John A. Curry* **CURRY, JOHN A. President** **Jan 15 1998**

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 D	NAME CURRY, JOHN A.	1.1 TITLE TREASURER	1.2 NAME EVELYN, ELIZABETH
STREET ADDRESS 9575 TOLEDO LANE	CITY-ST-ZIP FORT LAUDERDALE FL	1.3 STREET ADDRESS 9505 Toledo Lane	1.4 CITY-ST-ZIP FT. LAUDERDALE FL 33324
TITLE DV	NAME RELOS, ANTHONY	2.1 TITLE DV	2.2 NAME Doyle - Hugh
STREET ADDRESS 2200 MALAGA CT.	CITY-ST-ZIP FT LAUDERDALE FL	2.3 STREET ADDRESS 4500 ALCAZAR LANE	2.4 CITY-ST-ZIP FT. LAUDERDALE FL 33324
TITLE DT	NAME WULFORST, HOWARD	3.1 TITLE	3.2 NAME
STREET ADDRESS 9540 SEVILLA LANE	CITY-ST-ZIP FORT LAUDERDALE FL	3.3 STREET ADDRESS	3.4 CITY-ST-ZIP
TITLE D	NAME TAFEEEN, BERNADINE	4.1 TITLE	4.2 NAME
STREET ADDRESS 2200 MALAGA CT	CITY-ST-ZIP FT LAUDERDALE FL	4.3 STREET ADDRESS	4.4 CITY-ST-ZIP
TITLE D	NAME AVILA, ADELA	5.1 TITLE	5.2 NAME
STREET ADDRESS 9505 SEVILLA LANE	CITY-ST-ZIP FORT LAUDERDALE FL 33324	5.3 STREET ADDRESS	5.4 CITY-ST-ZIP
TITLE D	NAME LINEY, DOROTHY	6.1 TITLE	6.2 NAME
STREET ADDRESS 9580 TOLEDO LANE	CITY-ST-ZIP FT LAUDERDALE FL	6.3 STREET ADDRESS	6.4 CITY-ST-ZIP

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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 *John A. Curry* **Jan 15 1998**

CR2E037 (10/97)