


FILE NOW: FILING FEE IS \$61.25

FILED

**Feb 04 1998 8:00am
Secretary of State**

NONPROFIT CORPORATION ANNUAL REPORT 1998		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
---	---	---

DOCUMENT # 760617 (1)
1. Corporation Name

CASCADES OF LAUDERHILL CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business 4373 ROCK ISLAND ROAD LAUDERHILL FL 33319	Mailing Address 4373 ROCK ISLAND ROAD LAUDERHILL FL 33319
---	---

3. Date Incorporated or Qualified
11/06/1981

4. FEI Number
59-2137239

Applied For	Not Applicable
-------------	----------------

2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country 25	2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 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. 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

**CAMPBELL PROPERTY MANAGEMENT
4373 ROCK ISLAND RD LAUDERHILL, FL
1233 E HILLSBORO BLVD DEERFIELD BCH, FL
LAUDERHILL FL 33441**

10. Name and Address of New Registered Agent

81 Name	82 Street Address (P.O. Box Number is Not Acceptable)	83	84 City	85 Zip Code
			FL	

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 _____ (NOTE: Registered Agent signature required when reinstating) DATE _____

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
T DAVIS, GERALD 7840 NW 50TH ST LAUDERHILL FL	<input type="checkbox"/> DELETE	1.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
D CRONK, SHEILA 7720 NW 50 ST LAUDERHILL FL	<input type="checkbox"/> DELETE	1.2 NAME	
D GURALNICK, JACK 7740 NW 50 ST LAUDERHILL FL	<input type="checkbox"/> DELETE	1.3 STREET ADDRESS	
S SEGAL, PAULETTE 7980 NW 50 ST LAUDERHILL FL	<input type="checkbox"/> DELETE	1.4 CITY-ST-ZIP	
VP SCHWARTZ, SHELDON 7730 NW 50TH ST. #209 LAUDERHILL FL	<input type="checkbox"/> DELETE	2.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
P GREEN, STANLEY 7730 NW 50TH ST. #410 LAUDERHILL FL	<input type="checkbox"/> DELETE	2.2 NAME	
		2.3 STREET ADDRESS	
		2.4 CITY-ST-ZIP	
		3.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		3.2 NAME	
		3.3 STREET ADDRESS	
		3.4 CITY-ST-ZIP	
		4.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		4.2 NAME	
		4.3 STREET ADDRESS	
		4.4 CITY-ST-ZIP	
		5.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		5.2 NAME	
		5.3 STREET ADDRESS	
		5.4 CITY-ST-ZIP	
		6.1 TITLE	<input type="checkbox"/> Change <input type="checkbox"/> Addition
		6.2 NAME	
		6.3 STREET ADDRESS	
		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.

SIGNATURE: _____ SIGNATURE REQUIRED *Gerald Davis Tran 1/8/98*

CR2E037 (10/97)