FILE NOW: FILING FEE IS \$61.25

NONPROFIT CORPORATION ANNUAL REPORT

1998



FLORIDA DEPARTMENT OF STATE

Sandra B. Mortham

Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT #

761851

(5)

Mar	31	1998	8:00am
Se	cret	tary o	f State

FILED

FALLS	TOWNHOUSES HOMEO	WNERS ASSOCIATION, INC).							
Principal Plac	e of Business	Mailing Address							IJAN DIBU HEL	
12889 SW 91 CT 12889 SW 91 CT MAAM FL 33176 MIAM FL 33176						3. Date Incorporated or Qualified 03/11/1982 4. FEI Number Applied For				
9 600000	loss of Overing	Lac Maire Adding				59-2368081			lot Applicable	
2. Principal Place of Business 28. Mailing Address 21		26 Mailing Address				5. Certificate of Status Desired	<u> </u>		Additional tequired	
Sulte, Apt. #, etc.		Suite, Apt. #, etc.	Suite, Apt. #, etc.			6. Election Campaign Financing			May Be	
City & State		City & State			Trust Fund Contribution			to Fees		
City & State		28	⊢ ′			7. Is this nonprofit corporation a homeowners association? The yes No				
Zip	Country	Zip	Country			8. This corporation owes or has p		year Ir	ntangible	
24	25	29 34	0			Personal Property Tax due Jur			X No	
	9. Name and Address of Cu	rrent Registered Agent				10. Name and Address of New F	legistered Age	nt '		
			81	Name						
GONZALEZ, REBECCA			82	Street	Addres	ss (P.O. Box Number is Not Accepte	able)			
12806 SI Miami Fi			83							
MICAMIT	L 33 170			***						
			84	City			FL 8	i5 i Zip	Code	
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 Signifure, typed or proted name of registered agent and title if applicable (NOTE: Registered Agent algnature required when reinstating). DATE										
12.		AND DIRECTORS	13.	in algreature	- roopanoo	ADDITIONS/CHANGES TO OFF		RECTO	RS IN 12	
TITLE	PD	DELETE	1.1 TITLE		L	1010		Change	Addition	
NAME	DJOKIC, BORIS	ŕ	1.2 NAME		Par	m Earl-Parlere				
STREET ADDRESS	9188 SW 128 LANE		1.3 STREET	ADDRESS	19,	iami, F1 33176				
CITY-ST-ZIP	MIAMI FL	DELETE	1.4 CITY - S	T-ZIP				Change	Addition	
TITLE NAME	d Rosell, evelio	- Ottere	2.1 TITLE 2.2 NAME		,	\sqrt{Q}	حمر	Pusufic	Addition	
STREET ADDRESS	18361 SW 82ND AVE		2.3 STREET	ADDRESS	1					
CITY-ST-ZIP	MIAMI FL		2.4 CITY-5							
TITLE	VO OV	☐ DELETE	3.1 TITLE			D		Change	Addition	
NAME	SANFORD, STACI		3.2 NAME				,			
STREET ADDRESS	12809 SW 91 CT		3.3 STREET							
CITY-ST-ZIP	MIAMI FL	☐ DELETE	3.4. CITY - S	T-ZIP	ļ			Change	Addition	
TITLE NAME	CANEIGI D. DODINI	C DELETE	4.1 TITLE 4.2 NAME					Change		
STREET ADDRESS	CANFIELD, ROBIN 12808 SW 91 CT		4.2 PORME 4.3 STREET	ADDDECC	Ì					
CITY-ST-ZIP	MIAMI FL		4.4 City-S							
TITLE	D	DELETE	5.1 TITLE	1-24	P			Change	☐ Addition	
NAME	MAYERS, TODD		5.2 NAME		"			-		
STREET ADDRESS	12805 SW 91 CT		5.3 STREET	ADDRESS						
CITY-ST-ZIP	MIAMI FL		5.4 CITY - S	T-ZIP	<u> </u>					
TITLE	TD	☐ DELETE	6.1 TITLE					Change	Addition	
NAME	GONZALEZ, REBECCA		6.2 NAME							
STREET ADDRESS	12806 SW 91 CT		6.3 STREET	address						
CITY-ST-ZIP	MIAMI FL		6.4 CITY - S	T-ZIP	L					

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 emowered 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 attention of the receiver of trustee emonance in the statute of the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee emonance in the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee emonance in the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver or trustee emonance in the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee emonance in the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver or trustee emonance in the same legal effect as if made under oath; that I am an officer or director of the corporation of the receiver of the re

SIGNATURE: >

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3/18/98

305-238-5804

Fall Townhouses Homeowners Association

Additional Directors

Title: D

Name: Linda Willis Street: 9178 SW 128 Lane City, State, Zip: Miami, Fl 33176

Title:

Name: Deborah Kroliekiwicz Street: 12811 SW 91 Court City, State, Zip: Miami, Fl 33176