FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

FLORIDA DEPARTMENT OF STATE
Sandra B Mortham
Secretary of State
DIVISION OF CORPORATIONS

APPROVED AND FILED

95 MAR -2 PM 3:49

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # 763504 (8)

1. Corporation Name

SUNFLOWER MARGATE ASSOCIATION, INC.

Principal Place of Business	Mailing Address
2139 UNIVERSITY DRIVE SUITE 240 CORAL SPRINGS FL 33071-6137	2139 UNIVERSITY DRIVE SUITE 240 CORAL SPRINGS FL 33071-6137

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 06/02/1982
3a. Date of Last Report: 02/28/1994
4. FEI Number: 65-0034273 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status ☐ $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☑ No

2. Principal Place of Business	2a. Mailing Address
21	26
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27
City & State 23	City & State 28
Zip 24 / Country 25	Zip 29 / Country 30

9. Name and Address of Current Registered Agent

KESLING DONALD
2139 UNIVERSITY DRIVE
CORAL SPRINGS 33071

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 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE _____ DATE
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12		
TITLE	P D	1.1 TITLE	PS	☐ Change ☐ Addition
NAME	KESLING, DONALD	1.2 NAME		
STREET ADDRESS	7602 NW 18TH PLACE	1.3 STREET ADDRESS		
CITY-ST-ZIP	MARGATE FL 33063	1.4 CITY-ST-ZIP		
TITLE	TD	2.1 TITLE	TO	☑ Change ☐ Addition
NAME	ROACH, NICK	2.2 NAME	LEVINE MORTON	
STREET ADDRESS	7804 SUNFLOWER DR	2.3 STREET ADDRESS	7600 N.W. 18TH PLACE	
CITY-ST-ZIP	MARGATE FL	2.4 CITY-ST-ZIP	MARGATE FL 33063	
TITLE	SD	3.1 TITLE	SD	☑ Change ☐ Addition
NAME	CRONEY, RACHAEL	3.2 NAME	SILVERMAN MELVIN	
STREET ADDRESS	1914 NW 79 TERR	3.3 STREET ADDRESS	7619 SUNFLOWER DRIVE	
CITY-ST-ZIP	MARGATE FL	3.4 CITY-ST-ZIP	MARGATE FL 33063	
TITLE	PD	4.1 TITLE	D	☑ Change ☐ Addition
NAME	LACOSTA, RICARDO	4.2 NAME	BERNARDO JOSEPH	
STREET ADDRESS	7911 NW 20TH ST	4.3 STREET ADDRESS	7621 SUNFLOWER	
CITY-ST-ZIP	MARGATE FL	4.4 CITY-ST-ZIP	MARGATE FL 33063	
TITLE	D	5.1 TITLE	D	☑ Change ☐ Addition
NAME	LABIONDO, GERALD	5.2 NAME	PALICELLA JOHN	
STREET ADDRESS	1903 NW 79 AVE	5.3 STREET ADDRESS	1901 N.W. 79TH AVE	
CITY-ST-ZIP	MARGATE FL	5.4 CITY-ST-ZIP	MARGATE FL 33063	
TITLE	D	6.1 TITLE		☐ Change ☐ Addition
NAME	FRIEDMAN, STU	6.2 NAME		
STREET ADDRESS	1905 NW 80TH AVE	6.3 STREET ADDRESS		
CITY-ST-ZIP	MARGATE FL 33063	6.4 CITY-ST-ZIP		

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Morton J. Levine MORTON I. LEVINE 2/27/95 305-971-4379
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #

0006030