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Apr 30 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 # **766408** (9)
1. Corporation Name
CORNELL CONDOMINIUM ASSOCIATION, INC.



Principal Place of Business % MARSHALL D. PLATT, ESQUIRE 4801 SHERIDAN ST., 5TH FL., HOLLYWOOD FL 33021	Mailing Address % MARSHALL D. PLATT, ESQUIRE 4801 SHERIDAN ST., 5TH FL., HOLLYWOOD FL 33021
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2. Principal Place of Business 21 3864 Sheridan Street Suite, Apt. #, etc. 22 City & State 23 Hollywood, Florida 33021 Zip 24 33021 Country 25 USA	2a. Mailing Address 26 3864 Sheridan Street Suite, Apt. #, etc. 27 City & State 28 Hollywood, Florida 33021 Zip 29 33021 Country 30 USA
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3. Date Incorporated or Qualified 01/05/1983
4. FEI Number 59-2321267
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. 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 PLATT, MARSHALL D. PACKAR AND PLATT 4801 SHERIDAN ST., 5TH FLOOR HOLLYWOOD FL 33021	10. Name and Address of New Registered Agent 81 Name MARSHALL D. PLATT 82 Street Address (P.O. Box Number is Not Acceptable) 3864 Sheridan Street 83 84 City Hollywood FL 85 Zip Code 33021
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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 *M. D. Platt RA* DATE *4/24/98*

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 NAME STREET ADDRESS CITY - ST - ZIP	PD PLATT, MARSHALL D. 4801 SHERIDAN ST. 5TH FL HOLLYWOOD FL ☐ DELETE	1.1 TITLE 1.2 NAME 1.3 STREET ADDRESS 1.4 CITY - ST - ZIP	PD PLATT, MARSHALL D. 3864 Sheridan Street Hollywood, Florida 33021 ☒ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	VD PASSANTE, JOSEPH 2000 N. 47TH AVE. HOLLYWOOD FL ☐ DELETE	2.1 TITLE 2.2 NAME 2.3 STREET ADDRESS 2.4 CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	TD MELL, ALEXANDER 1351 SW 74TH TERRACE PLANTATION FL ☐ DELETE	3.1 TITLE 3.2 NAME 3.3 STREET ADDRESS 3.4 CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D HEDGES, RONALD 1919 PLUNKETT ST. #8 HOLLYWOOD FL ☐ DELETE	4.1 TITLE 4.2 NAME 4.3 STREET ADDRESS 4.4 CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	D PASSANTE, DEBRA 2000 N. 47TH AVE. HOLLYWOOD FL ☐ DELETE	5.1 TITLE 5.2 NAME 5.3 STREET ADDRESS 5.4 CITY - ST - ZIP	☐ Change ☐ Addition
TITLE NAME STREET ADDRESS CITY - ST - ZIP	☐ DELETE	6.1 TITLE 6.2 NAME 6.3 STREET ADDRESS 6.4 CITY - ST - ZIP	☐ Change ☐ Addition

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: *M. D. Platt President* DATE: *4-22-98* TELEPHONE: *954-981-2211*

CR2E037 (10/97)