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 #

766823

(9)

PLAYDIUM MANAGEMENT COMPANY, INC.

FILED	
Feb 05 1998 8:00ar	n
Secretary of State	,

Principal Place of Business	pal Place of Business Mailing Address					
% AL HINDERMAN 1100 HILLCREST DRIVE 1100 HILLCREST DRIVE HOLLYWOOD FL 33021 US US			3. Date Incorporated or Qualified 02/03/1983 4. FEI Number Applied For			
2. Principal Place of Business	2a. Mailing Address			59-2263251 Not Applicable		
21	26			5. Certificate of Status Desired		
Suite, Apt. #, etc.	Suite, Apt. #, etc.			8. Election Campaign Financing \$5.00 May Be Trust Fund Contribution Added to Fees		
City & State	City & State			7. Is this nonprofit corporation a homeowners association? Yes X No		
Zip Country	Zip Countr		ntry	8. This corporation owes or has paid the current year Intangible		
24 25	29	30		Personal Property Tax due June 30. Yes X No		
9. Name and Address of Curren	t Registered Agent		24 L N	10. Name and Address of New Registered Agent		
		l'	81 Nar	lame		
HINDERMAN, AL		-	82 Stre	treel Address (P.O. Box Number is Not Acceptable)		
1313 Washington Street Hollywood FL 33019		ļ.	B3			
HOLLIMOOD PL 33018		-	24 63			
		- 1	B4 City	fL T		
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 AL HINDERMAN	MANAGER					
Signature, typed or printed name of registered ago			Agent signs	gnature required when reinstating) DATE		
12. OFFICERS AND	DELETE	13. 1.1 TITL	t.	ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 Change Addition		
NAME KRIEGER, GEORGE	<u> </u>	1.2 NAME				
STREET ADDRESS 4200 HILLCREST DR #1004		1.3 STR	EET ADDRES	PRESS		
CITY-ST-ZIP HOLLYWOOD FL		1.4 CITY				
TITLE VD	☐ DELETE	2.1 1111		Change Addition		
NAME ED ROSENBERG		2.2 NAM		P 401.4		
STREET ADDRESS 4400 HILLCREST DR. CITY-ST-ZIP HOLLYWOOD FL			eet addres Y-st-zip			
TITLE SD	☐ DELETE	3.1 TITL		Change K Addition		
NAME FALKENSTEIN, JACK		3.2 NAM	ΛE			
STREET ADDRESS 4350 HILLCREST DRIVE		3.3 STREET		RESS APT #917		
CITY-ST-ZIP HOLLYWOOD FL		3.4. CITY - ST - Z				
TITLE TD	☐ DELETE	4.1 TITL	.E	☐ Change ☐ Addition		
NAME ZUCKERBROD, SID		4. 2 NA				
STREET ADDRESS 4700 WASHINGTON ST 105 CITY-ST-ZIP HOLLYWOOD FL			EET ADDRES			
CITY-ST-ZIP HOLLYWOOD FL	☐ DELETE	4.4 City-St-ZiP 5.1 Title		Change Addition		
NAME .		5.2 NAN				
STREET ADDRESS			 Eet addres	RESS		
CITY-ST-ZIP		5.4 CITY	-ST-ZIP			
TITLE	DELETE	6.1 TITE	E	☐ Change ☐ Addition		
NAME		6.2 NAN				
STREET ADDRESS			EET ADDRES			
CITY-ST-ZIP	th this filing does not qualify fo		-ST-ZIP nption st	stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information		

indicated on this ennual 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.

GNATURE:

SIGNATURE: