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Mar 17 1997 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997



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

DOCUMENT # 767499 (7)  
1. Corporation Name  
THE VILLAGE AT LAKE PINE HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business Mailing Address  
10001 W OAKLAND PK BLVD STE 300 SUNRISE FL 33351 US  
10001 W OAKLAND PARK BLVD STE 300 SUNRISE FL 33351-6925 US

3. Date Incorporated or Qualified 03/15/1983  
3a. Date of Last Report 04/23/1996

2. Principal Place of Business 21 3475 HIATUS RD  
2a. Mailing Address 26 3475 HIATUS RD  
Suite, Apt. #, etc. 27

4. FEI Number 59-2294734  
Applied For Not Applicable

23. City & State SUNRISE, FL  
28. City & State SUNRISE, FL

5. Certificate of Status Desired \$8.75 Additional Fee Required  
6. Election Campaign Financing Trust Fund Contribution \$5.00 May Be Added to Fees

24. Zip 33351 25. Country USA  
29. Zip 33351 30. Country USA

8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes Yes No

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

POLIAKOFF, GARY A. ESQ.  
3111 STIRLING RD  
POST OFFICE BOX 9057  
FT LAUDERDALE FL 33310

81. Name MALCOLM H. WALDRON III  
82. Street Address (P.O. Box Numbers Not Acceptable) AEM PROPERTY MGT.  
83. 3475 HIATUS RD  
84. City SUNRISE FL 85. Zip Code 33351

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 [Signature] (NOTE: Registered Agent signature required when reinstating)

DATE 3/11/97

12. OFFICERS AND DIRECTORS

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

Table with 4 columns: TITLE, NAME, STREET ADDRESS, CITY-ST-ZIP. Includes entries for DOMINGUEZ, RICHARD; LEVINE, MARK; VIZZINI, DOUGLAS; FRIEDMAN, MARK; SMITH, THERESA G.

Table with 4 columns: 1.1 TITLE, 1.2 NAME, 1.3 STREET ADDRESS, 1.4 CITY-ST-ZIP. Includes entry for MCPHERSON, JOHN.

14. I do 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 checked, or on an attachment with an address.

SIGNATURE [Signature] DATE 2/11/97 (and) 11-28-97

CR2E037 (9/96)