FILE NOW: FILING FEE IS \$61.25

FILED Apr 15 1998 8:00am NONPROFIT FLORIDA DEPARTMENT OF STATE CORPORATION Bandra B. Mortham ANNUAL REPORT Secretary of State Secretary of State 1998 **DIVISION OF CORPORATIONS DOCUMENT #**1. Corporation Name 767810 (5) MORNINGSIDE HOMEOWNER'S ASSOCIATION, INC. Principal Place of Business Malling Address 760 NE 77 ST. 760 NE 77 ST. 3. Date Incorporated or Qualified **BOCA RATON FL 33487 BOCA RATON FL 33487** 04/05/1983 4. FEI Number Applied For 65-0119231 Not Applicable 2. Principal Place of Business 2a. Malling Address \$8.75 Additional 5. Certificate of Status Desired Fee Required Suite, Apt. #, etc. Suite, Apt. #, etc. \$5.00 May Be 6. Election Campaign Financing 22 Trust Fund Contribution Added to Fees City & State City & State 7. Is this nonprofit corporation a homeowners association? Yes 🔲 No 23 Zip Country Zip Country 8. This corporation owes or has paid the current year Intangible Yes Personal Property Tax due June 30. 10. Name and Address of New Registered Agent 9. Name and Address of Current Registered Agent 81 Name WAGNER, JOHN E Street Address (P.O. Box Number is Not Acceptable) 760 NE 77 ST. 83 **BOCA RATON FL 33487** 84 City 85 Zip Code 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, typed or printed name of registered agent and title if applicab (NOTE: Registered Agent signature required when reinstating) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12 12. OFFICERS AND DIRECTORS 13. DELETE Change Addition TITLE 1.1 TITLE SECTDIR. HARRARI, JOHN 1.2 NAME NAME ANESTH-LENORG 800 NE 77TH ST 1.3 STREET ADDRESS STREET ADDRESS 800 - NE 77 St **BOCA RATON FL 33487** CITY-ST-ZIP 1.4 CITY-ST-ZIP DELETE 2.1 TITLE Change Addition NAME WAGNER, JOHN 2.2 NAME STREET ADDRESS 760 NE 77 ST. 2.3 STREET ADDRESS CITY-ST-ZIP **BOCA RATON FL 33487** 2. 4 CITY-ST-ZIP VD DELETE Change Addition TITLE 3.1 TITLE CORRARI, DIANNE 3.2 NAME NAME 760 NE 77 ST. STREET ADDRESS 3.3 STREET ADDRESS **BOCA RATON FL 33487** CITY-ST-ZIP 3.4. CITY-ST-ZIP DELETE 4.1 TITLE ___ Addition TITLE STETSON, ROBERT 4. 2 NAME NAME STREET ADDRESS 850 NE 8 WAY 4.3 STREET ADDRESS **BOCA RATON FL 33487** 4.4 CITY-ST-ZIP CITY-ST-ZIP Addition DELETE Change 5.1 TITLE TITLE RABADAN, EDWARDO 5.2 NAME

14. Thereby certify that the Information supplied with this filling 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 slub-lemental 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 by the receiver of 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 chapted or do in attachment with an address.

5.3 STREET ADDRESS

6.3 STREET ADDRESS 6.4 CITY-ST-ZIP

5.4 CITY-ST-ZIP

61 TITLE

62 NAME

DELETE

SIGNATURE:

STREET ADDRESS

CITY-ST-ZIP

CITY-ST-ZIP

TITLE

NAME STREET ADDRESS 821 NE 77 ST

BOCA RATON FL

Addition

Change