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Mar 18 1998 8:00am  
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1998



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

DOCUMENT # 769015 (9)  
Corporation Name  
GOLDEN ISLES LAKES CONDOMINIUM, INC.



Principal Place of Business: 1900 DIANA DRIVE HALLANDALE FL 33009  
Mailing Address: 1900 DIANA DRIVE HALLANDALE FL 33009

3. Date Incorporated or Qualified: 06/21/1983  
4. FEI Number: 59-2702934  
Applied For: Not Applicable

2. Principal Place of Business (21-24) and 2a. Mailing Address (25-28) fields with sub-headers for Suite, City, State, Zip, and Country.

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  
GONZALEZ, WANDA O  
1900 DIANA DR., APT. C-1  
APT. 2-E  
HALLANDALE FL 33009

10. Name and Address of New Registered Agent  
81 Name: CYNTHIA C. LEES  
82 Street Address: 1900 DIANA DR. Apt B-1  
83  
84 City: HALLANDALE FL 85 Zip Code: 33009

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: *Cynthia C. Lees* CYNTHIA C. LEES TREASURER 3-12-98 DATE

12. OFFICERS AND DIRECTORS

TITLE	PD	<input checked="" type="checkbox"/> DELETE
NAME	GONZALEZ, WANDA O	
STREET ADDRESS	1900 DIANA DR., APT. C-1	
CITY-ST-ZIP	HALLANDALE FL	
TITLE	TD	<input checked="" type="checkbox"/> DELETE
NAME	GONZALEZ, WANDA O.	
STREET ADDRESS	1900 DIANA DRIVE APT 1-C	
CITY-ST-ZIP	HALLANDALE FL 33009	
TITLE	SD	<input type="checkbox"/> DELETE
NAME	FRANCESHINI, MARIA S.	
STREET ADDRESS	1900 DIANA DRIVE APT 1-A	
CITY-ST-ZIP	HALLANDALE FL 33009	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	GONZALEZ, GEORGE	
STREET ADDRESS	1900 DIANA DRIVE	
CITY-ST-ZIP	HALLANDALE FL 33009	
TITLE	D	<input checked="" type="checkbox"/> DELETE
NAME	ROTSCHER, MARY	
STREET ADDRESS	1900 DIANA DR., #C-2	
CITY-ST-ZIP	HALLANDALE FL	
TITLE		<input type="checkbox"/> DELETE
NAME		
STREET ADDRESS		
CITY-ST-ZIP		

13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	PD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
1.2 NAME	DANIEL E. LEES	
1.3 STREET ADDRESS	1900 DIANA DR., APT B-1	
1.4 CITY-ST-ZIP	HALLANDALE, FL 33009	
2.1 TITLE	TD	<input checked="" type="checkbox"/> Change <input type="checkbox"/> Addition
2.2 NAME	CYNTHIA C. LEES	
2.3 STREET ADDRESS	1900 DIANA DR, APT B-1	
2.4 CITY-ST-ZIP	HALLANDALE, FL 33009	
3.1 TITLE	SD	<input type="checkbox"/> Change <input type="checkbox"/> Addition
3.2 NAME		
3.3 STREET ADDRESS	same as	
3.4 CITY-ST-ZIP		
4.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY-ST-ZIP		
5.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY-ST-ZIP		
6.1 TITLE		<input type="checkbox"/> Change <input type="checkbox"/> Addition
6.2 NAME		
6.3 STREET ADDRESS		
6.4 CITY-ST-ZIP		

14. I hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(l), 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: *Cynthia C. Lees* CYNTHIA C. LEES 3/12/98 954-458-4677

CR2E037 (10/97)