## **FILE NOW: FILING FEE IS \$61.25**

**NONPROFIT** CORPORATION ANNUAL REPORT

1999



FLORIDA DEPARTMENT OF STATE

Katherine Harris

Secretary of State DIVISION OF CORPORATIONS

## **DOCUMENT # 770951**

1. Corporation Name

## CARMEL AT THE CALIFORNIA CLUB CONDOMINIUM "1" AS SOCIATION, INC.

Principal Place of Business
C/O DCI 2901 SIMMS ST: HOLLYWOOD FL 33020 US

21

2. Principal Place of Business

Mailing Address 2901 SIMMS ST HOLLYWOOD FL 33020

2a. Mailing Address

26

## **FILED** Mar 22, 1999 8:00 am secretary of State

03-22-1999 90135 012 \*\*\*\*61.25

Applied For

Date Incorporated or Qualifed 10/27/1983

211		1201								٦.
Suite, Apt.	#, etc.	Suite, Apt. #, etc.				4. FEI Number 59-2352021			pplied For ot Applicable	4
22		City & State				00 2002021			Additional	┨
City & State		City & State				5. Certifcate of Status Desired		. +	equired_	١.
23 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2				ntry		Election Campaign Financing			May Be	1=
Zip	— — — — — — — — — — — — — — — — — — —			Trust Fund Contribution				· -	to Fees	-
24	25   29   30   30   30   30   30   30   30   3					10. Name and Address of New Registered Agent				1
	o. Name and Address of Ourient	registered Agent		81 !	Name					1
ANDDEN!	ALIMANTA TARANANA		Ļ		<u> </u>			<del> </del>		4
ANDREW MEYKOWITZ				82 Street Address (P.O. Box Number is Not Acceptable)						
C/O DCI				83						
2901 SIMMS ST. HOLLYWOOD FL 33020										↲
HULLYWU	OU FL 33020		-	84 (	City		FL	85   Zip	Code	
44 0	to the provisions of Sections 617.0502	and 617 1509 Elorida Statute	e the ah	ove-n	amed cornor	ation submits this statement for the		hanging its	registered	1
office or ri	egistered agent, or both, in the State of	Florida. Such change was au	ithonzea	DY IN	e corporation	's board of directors. I hereby accep	t the appoin	tment as re	gistered	1
agent. I a	m familiar with, and accept the obligation	ons of, Section 617.0503, Flor	ida Statu	tes.						
SIGNATURE		AIOTE.	Da mintered	A name ni	gnature required v	iden reinstating)	DATE			1
12.	Signature, typed or printed name of registered agent a OFFICERS AND		13.	Agent si	Austrie Ledoileo A	ADDITIONS/CHANGES TO OF		DIRECTO	ORS IN 12	1
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	APA NE 400 AT 404		1	2.3 STREET ADDRESS		351 NE 199TH ST				
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CITY-ST-ZIP TITLE	TD.	X DELETE				PD JAMES_KENNETT_		Change	Addition	
- <u>''''</u> ' NAME	J. L. KENNETT		3.2 NA			751 NE 199th S	CREET			
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NAME		<u> </u>	6.2 NA	ME						1
STREET ADDRESS			6.3 STI	REETAL	DORESS					
CITY-ST-ZIP			6.4 CIT	Y-ST-Z	IP					
14. I hereby	certify that the information supplied with	this filing does not qualify for				ection 119.07(3)(i), Florida Statutes.	further cert	ify that the	information	_

indicated on this annual report or supplied with this limit does not quality for the exemple stated in 35.07(5)(f). Horizo states. From the carbon that the 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, with all other like empowered.