

FILE NOW: FILING FEE IS \$61.25

FILED
Apr 14, 1999 8:00 am
Secretary of State

04-14-1999 90223 043 ****61.25

NONPROFIT CORPORATION ANNUAL REPORT 1999				FLORIDA DEPARTMENT OF STATE Katherine Harris Secretary of State DIVISION OF CORPORATIONS	
DOCUMENT # N02363					
1. Corporation Name TOWN CENTER CLUB AUTHORITY, INC.					
Principal Place of Business 16690 SADDLE CLUB RD. FT. LAUDERDALE FL 33326			Mailing Address 16690 SADDLE CLUB RD. FT. LAUDERDALE FL 33326		



2. Principal Place of Business 21 Suite, Apt. #, etc. 22 City & State 23 Zip 24 Country		2a. Mailing Address 26 Suite, Apt. #, etc. 27 City & State 28 Zip 29 Country		3. Date Incorporated or Qualified 04/04/1984 4. FEI Number 59-2385997 Applied For Not Applicable																																																																																																																																																																									
5. Certificate of Status Desired ☐ \$8.75 Additional Fee Required		6. Election Campaign Financing Trust Fund Contribution ☐ \$5.00 May Be Added to Fees																																																																																																																																																																											
9. Name and Address of Current Registered Agent FEDDERWITZ, ROBERT 16690 SADDLE CLUB RD. FT. LAUDERDALE FL 33326			10. Name and Address of New Registered Agent 81 Name 82 Street Address (P.O. Box Number is Not Acceptable) 83 84 City FL 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 <i>Robert Fedderwitz</i> DATE 4/12/99 Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating)																																																																																																																																																																													
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OFFICERS AND DIRECTORS <table border="1"> <tr> <td>TITLE</td> <td>P</td> <td>DELETE</td> </tr> <tr> <td>NAME</td> <td>POZEN, JERRY</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>693 RACQUET CLUB RD</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>FT LAUDERDALE FL</td> <td></td> </tr> <tr> <td>TITLE</td> <td>D</td> <td>DELETE</td> </tr> <tr> <td>NAME</td> <td>MENDLER, ARNOLD</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>432 LAKEVIEW DR</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>WESTON FL 33326</td> <td></td> </tr> <tr> <td>TITLE</td> <td>FP</td> <td>DELETE</td> </tr> <tr> <td>NAME</td> <td>FRIEDMAN, MARSHALL</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>363 IVY LN</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>FT LAUDERDALE FL</td> <td></td> </tr> <tr> <td>TITLE</td> <td>S</td> <td>DELETE</td> </tr> <tr> <td>NAME</td> <td>CUTLER, RUDY</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>16300 GOLF CLUB RD 716</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>WESTON FL 33326</td> <td></td> </tr> <tr> <td>TITLE</td> <td>D</td> <td>DELETE</td> </tr> <tr> <td>NAME</td> <td>PULLMAN, IRV</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>16671 WATERS EDGE DR</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>FT LAUDERDALE FL</td> <td></td> </tr> <tr> <td>TITLE</td> <td>T</td> <td>DELETE</td> </tr> <tr> <td>NAME</td> <td>CHERMAN, MURRAY</td> <td></td> </tr> <tr> <td>STREET ADDRESS</td> <td>1661 WTERS EDGE DR</td> <td></td> </tr> <tr> <td>CITY-ST-ZIP</td> <td>WESTON FL 33326</td> <td></td> </tr> </table>			TITLE	P	DELETE	NAME	POZEN, JERRY		STREET ADDRESS	693 RACQUET CLUB RD		CITY-ST-ZIP	FT LAUDERDALE FL		TITLE	D	DELETE	NAME	MENDLER, ARNOLD		STREET ADDRESS	432 LAKEVIEW DR		CITY-ST-ZIP	WESTON FL 33326		TITLE	FP	DELETE	NAME	FRIEDMAN, MARSHALL		STREET ADDRESS	363 IVY LN		CITY-ST-ZIP	FT LAUDERDALE FL		TITLE	S	DELETE	NAME	CUTLER, RUDY		STREET ADDRESS	16300 GOLF CLUB RD 716		CITY-ST-ZIP	WESTON FL 33326		TITLE	D	DELETE	NAME	PULLMAN, IRV		STREET ADDRESS	16671 WATERS EDGE DR		CITY-ST-ZIP	FT LAUDERDALE FL		TITLE	T	DELETE	NAME	CHERMAN, MURRAY		STREET ADDRESS	1661 WTERS EDGE DR		CITY-ST-ZIP	WESTON FL 33326		13. 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14. I 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 changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: SIGNATURE REQUIRED

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone #

CR2E037 (1/98)