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Mar 03 1997 8:00am
Secretary of State

NONPROFIT CORPORATION ANNUAL REPORT 1997		FLORIDA DEPARTMENT OF STATE Sandra B. Mortham Secretary of State DIVISION OF CORPORATIONS
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DOCUMENT # **N02429** (1)

1. Corporation Name

GLEN OAKS HOMEOWNERS' ASSOCIATION, INC.



Principal Place of Business % JOE BERKOVITS 621 N.W. 102ND AVENUE CORAL SPRINGS FL 33071	Mailing Address % JOE BERKOVITS 621 N.W. 102ND AVENUE CORAL SPRINGS FL 33071-8800
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3. Date Incorporated or Qualified 04/09/1984	3a. Date of Last Report 03/07/1996
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2. Principal Place of Business 21 4350 S. DIXIE HWY Suite, Apt. #, etc. 22 SUITE 900 City & State 23 MIAMI, FL Zip 24 33156	2a. Mailing Address 26 4350 S. DIXIE HWY Suite, Apt. #, etc. 27 SUITE 900 City & State 28 MIAMI, FL Zip 29 33156
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4. FEI Number 65-0008115	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
8. This corporation has liability for intangible tax under s. 199.032, Florida Statutes ☐ Yes ☒ No	

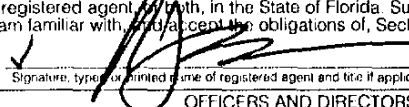
9. Name and Address of Current Registered Agent

**BERKOVITS, JOE S.
8211 W BROWARD BLVD. SUITE 340
PLANTATION, FL
FT. LAUDERDALE FL 33071**

10. Name and Address of New Registered Agent

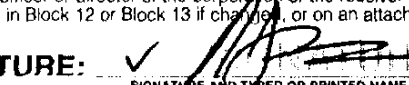
81 Name ROBERT J. PUCK
82 Street Address (P.O. Box Number is Not Acceptable) 4350 S. DIXIE HWY # 900
83
84 City MIAMI
85 FL
86 Zip Code 33156

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, 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  DATE **2/25/97**

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	PD ☐ DELETE	1.1 TITLE	☐ Change ☐ Addition
NAME	PUCK, ROBERT J.	1.2 NAME	
STREET ADDRESS	10417 N.W. 6TH STREET	1.3 STREET ADDRESS	
CITY - ST - ZIP	CORAL SPRINGS FL	1.4 CITY - ST - ZIP	
TITLE	VD ☐ DELETE	2.1 TITLE	☐ Change ☐ Addition
NAME	HOPP, ROBERT M.	2.2 NAME	
STREET ADDRESS	10330 N.W. 6TH STREET	2.3 STREET ADDRESS	
CITY - ST - ZIP	CORAL SPRINGS FL	2.4 CITY - ST - ZIP	
TITLE	SD ☐ DELETE	3.1 TITLE	☐ Change ☐ Addition
NAME	WANDNER, ANDREA	3.2 NAME	
STREET ADDRESS	10434 NW 6 CT	3.3 STREET ADDRESS	
CITY - ST - ZIP	CORAL SPRINGS FL	3.4 CITY - ST - ZIP	
TITLE	TD ☒ DELETE	4.1 TITLE	☐ Change ☐ Addition
NAME	BERKOVITS, JOE S.	4.2 NAME	
STREET ADDRESS	621 N.W. 102ND AVENUE	4.3 STREET ADDRESS	
CITY - ST - ZIP	CORAL SPRINGS FL	4.4 CITY - ST - ZIP	
TITLE	VD ☐ DELETE	5.1 TITLE	☐ Change ☐ Addition
NAME	WILLMERING, RICHARD A.	5.2 NAME	
STREET ADDRESS	10334 N.W. 6TH COURT	5.3 STREET ADDRESS	
CITY - ST - ZIP	CORAL SPRINGS FL	5.4 CITY - ST - ZIP	
TITLE	TD ☐ DELETE	6.1 TITLE	☐ Change ☒ Addition
NAME	TD	6.2 NAME	SAM GASPARDONI
STREET ADDRESS	CORAL SPRINGS FL	6.3 STREET ADDRESS	609 N.W. 102 AVE
CITY - ST - ZIP	CORAL SPRINGS FL	6.4 CITY - ST - ZIP	CORAL SPRINGS, FL 33071

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 changed, or on an attachment with an address.

SIGNATURE:  **ROBERT J. PUCK, PRESIDENT 2/25/97 621-2277**
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone # 0026062

CR2E037 (9/96)