FILE NOW: FILING FEE AFTER MAY 1 IS $155.00

CORPORATION ANNUAL REPORT **1995**

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

APPROVED AND FILED

95 MAY -1 AM 9:55

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

DOCUMENT # **N05985** **(9)**

1. Corporation Name
REXMERE OWNERS ASSOCIATION, INC.

Principal Place of Business	Mailing Address
1296 SOUTHWET 114 WAY FT LAUDERDALE FL 33325	1296 SOUTHWET 114 WAY FT LAUDERDALE FL 33325

DO NOT WRITE IN THIS SPACE

3. Date Incorporated or Qualified: 11/02/1984
3a. Date of Last Report: 03/07/1994
4. FEI Number: 59-2646470 ☐ 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
7. Nonprofit with IRS 501(c)(3) Tax Exempt Status — $68.75 Supplemental Fee Not Required
8. This corporation has liability for intangible tax under S. 199.032, Florida Statutes ☐ Yes ☑ No

2. Principal Place of Business	2a. Mailing Address
21 9432 S.W. 51 COURT	26 9432 S.W. 51 COURT
22 Suite, Apt. #, etc.	27 Suite, Apt. #, etc.
23 City & State: COOPER CITY FL	28 City & State: COOPER CITY FL.
24 Zip: 33328 25 Country: U.S.A.	29 Zip: 33328 30 Country: U.S.A.

9. Name and Address of Current Registered Agent

MATTERN, GEORGE
1296 SOUTHWEST 114 WAY
FORT LAUDERDALE FL 33325

10. Name and Address of New Registered Agent

81 Name: FRANK C. RENNA
82 Street Address (P.O. Box Number is Not Acceptable): 9432 SW 51 COURT
83 City: COOPER CITY FL 33328
84 City FL 85 Zip Code

11. Pursuant to the provisions of Sections 607.0502 and 607.1508, 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 607.0505, Florida Statutes.

SIGNATURE: Frank C. Renna - Treasurer — 4-15-95
Signature, typed or printed name of registered agent and title if applicable (NOTE: Registered Agent signature required when reinstating) DATE

12. OFFICERS AND DIRECTORS		13. ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12	
TITLE	DP	11 TITLE	☐ Change ☐ Addition
NAME	COSTANZA, MILDRED	12 NAME	
STREET ADDRESS	11633 REXMERE BLVD.	13 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL	14 CITY-ST-ZIP	
TITLE	DV	21 TITLE	DV ☑ Change ☐ Addition
NAME	COSTANZA, TED	22 NAME	ROBERT ST. LAURENT
STREET ADDRESS	11633 REXMERE BLVD	23 STREET ADDRESS	1254 SW 116TH WAY
CITY-ST-ZIP	FT LAUDERDALE FL 33325	24 CITY-ST-ZIP	FT LAUDERDALE FL 33325
TITLE	V	31 TITLE	V ☑ Change ☐ Addition
NAME	DEMBECKI, HARRY	32 NAME	VINCENT CAMPANARO
STREET ADDRESS	11301 SW 12TH MANOR	33 STREET ADDRESS	11301 SW 9TH MANOR
CITY-ST-ZIP	FT LAUDERDALE FL	34 CITY-ST-ZIP	FT LAUDERDALE FL 33325
TITLE	S	41 TITLE	☐ Change ☐ Addition
NAME	LEIBLE, ELEANOR	42 NAME	
STREET ADDRESS	11656 SW 9 COURT	43 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL 33325	44 CITY-ST-ZIP	
TITLE	TD	51 TITLE	TD ☑ Change ☐ Addition
NAME	MATTERN, GEORGE	52 NAME	FRANK C. RENNA
STREET ADDRESS	1296 SW 114 WAY	53 STREET ADDRESS	9432 SW 51 COURT
CITY-ST-ZIP	FT LAUDERDALE FL	54 CITY-ST-ZIP	COOPER CITY FL 33328
TITLE	S	61 TITLE	☐ Change ☐ Addition
NAME	LEIBLE, ELEANOR	62 NAME	
STREET ADDRESS	11656 SW 9 COURT	63 STREET ADDRESS	
CITY-ST-ZIP	FT LAUDERDALE FL	64 CITY-ST-ZIP	

14. I do hereby certify that the information supplied with this filing is voluntarily furnished and 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: Frank C. Renna — 4-15-95 — (305) 434-5623
SIGNATURE AND TYPED OR PRINTED NAME OF BINDING OFFICER OR DIRECTOR — Date — Daytime Phone #

6047T88