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NONPROFIT CORPORATION ANNUAL REPORT
1999

FLORIDA DEPARTMENT OF STATE
Katherine Harris
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # N09175

1. Corporation Name
TAMARIND VILLAGE HOMEOWNERS ASSOCIATION, INC.

* 370263 - 90318 - 38 *

Principal Place of Business	Mailing Address
2550 CALAMONDIN CIRCLE COCONUT CREEK FL 33063	2550 CALAMONDIN CIRCLE COCONUT CREEK FL 33063

2. Principal Place of Business 21	2a. Mailing Address 26	3. Date Incorporated or Qualified 05/07/1985
Suite, Apt. #, etc. 22	Suite, Apt. #, etc. 27	4. FEI Number 59-2470145 ☐ Applied For ☐ Not Applicable
City & State 23	City & State 28	5. Certifcate of Status Desired ☐ $8.75 Additional Fee Required
Zip / Country 24 / 25	Zip / Country 29 / 30	6. Election Campaign Financing Trust Fund Contribution ☐ $5.00 May Be Added to Fees

9. Name and Address of Current Registered Agent

~~HARRIS, MILT~~
~~2473 FIDDLELEAF AVENUE~~
~~COCONUT CREEK FL 33063~~

10. Name and Address of New Registered Agent

81 Name: Montlack, Don
82 Street Address (P.O. Box Number is Not Acceptable): 2654 Callandra Terrace
83
84 City: Coconut Creek FL 85 Zip Code: 33063

14. 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.

Montlack 1/22/99
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 / NAME / STREET ADDRESS / CITY-ST-ZIP	PD HARRIS, MILT 2473 FIDDLELEAF AVENUE COCONUT CREEK FL 33063	☒ DELETE	1.1 TITLE / 1.2 NAME / 1.3 STREET ADDRESS / 1.4 CITY-ST-ZIP	VP Zaczek, Jeanne 2670 Aloe Avenue Coconut Creek, FL33063	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	~~VP~~ P RANDAZZO, ROCHELLE 2630 ALOE AVE COCONUT CREEK FL 33063	☐ DELETE	2.1 TITLE / 2.2 NAME / 2.3 STREET ADDRESS / 2.4 CITY-ST-ZIP	PD Randazzo, Rochelle 2630 Aloe Avenue Coconut Creek FL 33063	☒ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	T MILLER, MARTIN 2485 DAWN TREE TERRACE COCONUT CREEK FL 33063	☐ DELETE	3.1 TITLE / 3.2 NAME / 3.3 STREET ADDRESS / 3.4 CITY-ST-ZIP	Jack Erlich D 2530 Calamondin Circle Coconut Creek, FL 33063	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	S GURE, RUTH 2403 EPISA AVENUE COCONUT CREEK FL 33063	☐ DELETE	4.1 TITLE / 4.2 NAME / 4.3 STREET ADDRESS / 4.4 CITY-ST-ZIP		☐ Change ☐ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D DI LAURO, JOHN 2658 BLUE SARE COCONUT CREEK FL 33063	☒ DELETE	5.1 TITLE / 5.2 NAME / 5.3 STREET ADDRESS / 5.4 CITY-ST-ZIP	D Finklestein, Herman 2525 Dahoon Ave Coconut Creek, FL33063	☐ Change ☒ Addition
TITLE / NAME / STREET ADDRESS / CITY-ST-ZIP	D MONTLACK, DON 2654 CALLANDRA TERRACE COCONUT CREEK FL 33063	☐ DELETE	6.1 TITLE / 6.2 NAME / 6.3 STREET ADDRESS / 6.4 CITY-ST-ZIP		☐ Change ☐ Addition

CR2E037 (11/98)

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~~ Rochelle Randazzo 1/14/99
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR — Date — Daytime Phone #